

CHENANGO FORKS BLUE DEVIL YOUTH TOURNAMENT

DATE: January 20th, 2019
PLACE: Chenango Forks High School
1 Gordon Dr.
Binghamton, NY 13901
TIME: Wrestling starts at 9:00 A.M.
Check-in between 7:00 – 8:00 A.M.
REGISTRATION: **Pre-register only (NO WALK-INS)**
WE ARE ACCEPTING REGISTRATIONS BY EMAIL TILL 1/18/19
MUST BE POST MARKED BY 1/15/19
Limited to 250 wrestlers
Make checks payable to Chenango Forks Wrestling Club
Mail form and fee to: **Jim Arnold**
12 Auburn St.
Norwich, NY 13815

WEIGH-INS: Honor Weigh-in
Random weight checks will be done by Tournament Committee. One wrestler per team.

ENTRY FEE: \$25.00 per wrestler
ADMISSION: \$3.00 adults, \$1.00 children, under 5 free
RULES: 4-6 Man Round Robin
NYS High School Modified, Bout Time 1 min.-1 min.-1 min.
NO JV OR VARSITY EXPERIENCE

DIVISIONS: 6 & under, 7 & 8, 9 & 10, 11 & 12
Weight classes will be made up of 4 to 6 wrestlers by their actual weights and last years records. Proof of age will be required if contested.
Note: Tournament Committee has the right to combine or eliminate weight classes

AWARDS: Medals for all wrestlers

CONCESSIONS: Food and beverage will be available all day.
TOURN. INFO: Jim Arnold 607-427-1993, Email: cfyouthwrestling@gmail.com

ENTRY FORM (please print)

NAME _____ DIVISION _____ ACTUAL WEIGHT _____

ADDRESS _____

STATE _____ ZIP CODE _____ PHONE _____

AGE _____ DOB _____ SCHOOL/CLUB _____

EXP. LEVEL **Novice Amateur Stud Hammer**

I hereby assume full responsibility for my child/children in case of any injury and loss of personal belongings while traveling to and from, and/or participating in the Chenango Forks Youth Wrestling Tournament. I will not hold the Chenango Forks School District, Chenango Forks Wrestling Club, coaches, and staff responsible for any liability.

PARENT/GAURDIAN SIGNATURE _____ DATE _____