

INDIAN RIVER 1ST ANNUAL FEAR THE SPEAR

DATE: January 26, 2020

LOCATION: Indian River MIDDLE SCHOOL, 32735 County Route 29, Philadelphia, NY 13673

ENTRY FEE: \$30 for NYWAY Members. \$5 one day pass available to non-members in Online Registration. Register online via NYWAY website. No walk-ins will be allowed to compete. **Registration Closes at 11:59pm on Friday January 24th, 2020. No Refunds**



DIVISIONS:

D1 (6 AND UNDER)	Periods	1-1-1
D2 (7 & 8)	Periods	1-1-1
D3 (9 & 10)	Periods	1-1-1
D4 (11 & 12)	Periods	1-1-1
D5 (13 & 14)	Periods	1.5-1.5-1.5



BRACKETS: Wrestlers will be grouped into 6 man brackets where possible. Round Robin Tournament **MADISON SYSTEM - WEIGHTS CAN BE COMBINED UP TO 12%**

INFO: **FIRST 300 ENTRIES**
This is a Split Session Tournament. D1, D2, D5 will be Session 1 and D3 & D4 Session 2.

WEIGH INS: ALL WRESTLER'S WEIGHTS WILL BE CHECKED.
First Session 7:00 AM to 8:00 AM; Second Session 10:00 AM to 11:00 AM

START TIME: WRESTLING WILL BEGIN AT 9 AM for Session 1 (D1, D2, D5)
AND APPROXIMATELY 12 PM for Session 2 (D3 & D4)

RULES: Wrestlers can pay to wrestle in TWO divisions (NOT responsible for missed matches or rest time between division matches) All divisions are determined by birth year.

ELIGIBILITY: PROOF OF AGE AS OF 1/1/2020 - **NO VARSITY EXPERIENCE ALLOWED**

AWARDS: 1st - Plaque, 2nd & 3rd Large Custom Medals. **Team Tomahawks** for 1st, 2nd, 3rd MOW Rings with a Walnut Ring Display for each Division



ADMISSION FEE: \$3.00/ADULTS; \$1.00/STUDENTS

REFRESHMENTS: AVAILABLE ALL DAY, Breakfast, Lunch AND Snacks

INFORMATION: FOR MORE INFORMATION, PLEASE CONTACT:
Chad Lacey - 315-771-4234, Email - clacey1988@yahoo.com
Francis Bartlett - 315-777-5552, Email - francisbartlett77@yahoo.com



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I hereby release the Indian River wrestling program and the Indian River Central School District and Tournament Personal and Officials from any and all claims, liabilities by me directly or indirectly for traveling to or participating in the Indian River Youth Tournament. I have insurance coverage for this wrestler. I will pay for any property damage which I or my wrestler causes.

Name: _____ Birthdate: _____ Age: _____ Exact Weight: _____

School/Club: _____ Phone: _____ Division: _____

*Experience: (not years wrestled). Circle which applies: **Must Circle 5 to be eligible for Top 100!***

(1=Beginner and 5=Very Experienced/wins most matches)

1 2 3 4 5

Signature of Wrestler: _____ Signature of Parent/Guardian: _____ Date: _____