



Cobleskill-Richmondville

25th Annual Robert Ihrig Youth Wrestling Tournament



6 MAN ROUND ROBIN Tournament



PRE REGISTRATION by Thursday Dec.19th 6pm

*****To Register*** → <https://forms.gle/xSuBZWBs13Jctx4bA>**

Date **Sunday, December 22nd, 2024**

Location: Cobleskill-Richmondville High School,
1353 State Rt.7, Richmondville, NY 12149

Weigh-Ins: Div I, II & III 7:00 - 8:00 AM
Div IV & V 11:30 - 12:30

Divisions & Schedule: Division I (ages 6 & under)
Division II (ages 7-8)
Division III (ages 9-10)
Division IV (ages 11-12)
Division V (ages 13-14)

ALL WRESTLING BEGINS weigh-ins or upon completion of prior division

Entry Fee: \$30.00 (\$35.00 for returned checks)

Registration Payment: Cash, Check (Make checks payable to CRY Sports)
Venmo to: scolaro13@yahoo.com

Referees: Certified referees for Divisions II thru V

Awards: CHAMPIONSHIP RING and T-shirt for all Divisions
Trophies for 2nd & 3rd place in Div I, II & III
Medals for 2nd & 3rd in Div IV & V
Medals for all 4th place finishers

Rules: NYS Modified / HighSchool - wrestlers may pay to wrestle in two divisions (not responsible for missed matches or rest time between division matches). Periods are 1 min each.
*6 Man round robin where possible (weights may be combined up to 12%)
*Skin Check at Weigh-Ins (Doctor note required if visible rash exists)
*NO JV or VARSITY EXPERIENCE

Admission: Adults \$3 - Students \$1 - Children 10 and under free
(No unattended children please)

Refreshments: Breakfast, lunch, snacks and beverages will be available all day in the cafeteria. **Please support our program.**

ANY QUESTIONS Contact Tony Scolaro (518) 231-9737 or email : scolaro13@yahoo.com

Registration Form RI Tournament 2024

Name: _____

Age on 12/22/2024: _____ DOB: _____

Division _____ Actual Weight _____

Experience _____

Record _____ Tournaments Placed _____

Address & Town: _____

State: _____ Zip Code: _____ Phone: _____

School/Club: _____

In consideration of this entry being accepted, I hereby for my child and myself, waive and release any and all rights and claims for damages or injuries against the CRY Sports Organization, Cobleskill-Richmondville School District, its agents, representatives and assignees for any and all injuries suffered by my child or myself at said tournament at CR High School on December 22nd, 2024. I also understand that wrestling is a contact sport and injuries may result from participation in wrestling.

Parent/Guardian
Signature: _____

Date: _____