

2008 Bennington Youth Northeast Wrestling Challenge

This unique tournament format attempts to pool wrestlers of similar ability. All skill levels are encouraged to attend. This is one of the last chance qualifiers for the Gene Mills Eastern Nationals and the Ohio Tournament of Champions!

Date: Saturday, March 29th, 2008

Location: Mt. Anthony Union High School
Park Street Bennington, Vermont 05201

Entry Fee: \$20.00

Rules: High School rules.
Periods 1-1-1

Divisions: I – Ages 6 & under III – Ages 9 & 10 V – Ages 13 – 15
II – Ages 7 & 8 IV – Ages 11 & 12

***ANY WRESTLER THAT PARTICIPATED AT THE JUNIOR VARSITY OR VARSITY HIGH SCHOOL LEVEL IS NOT ELIGIBLE TO WRESTLE.**

Pooling: 4 Person Pools. (We attempt to pool wrestlers of similar abilities together in an attempt to get each wrestler 3 matches., however, on occasion this may not be possible due to factors beyond our control such as weigh difference, number of participants, incomplete or late entries etc..)

Awards: Trophies awarded for all wrestlers (1st-4th). Top 3 in each pool qualify for Ohio Tournament and all wrestlers will qualify for Gene Mills.

Time: Division I – II – III

Weigh-Ins – 7:00 – 9:00

Pooling – 9:00 – 10:30

Wrestling – 10:30 - 1:30

(or until completed)

Division IV & V

Weigh-Ins – 11:00 – 12:30

Pooling – 12:30 – 1:30

Warm ups- Auditorium (after DIV I is done)

Wrestling - 1:30 – until completed

Early Weigh-Ins: Friday March 28th @ the Hampton Inn 6:30 pm-9:00pm.

We prefer to weigh in as many wrestlers early which helps assure us that the tournament will begin on time.

Questions: Please call Jeff Whitesell @ (802-442-3337) or email at warp57jj@hotmail.com.

The Hampton Inn of Bennington is pleased to sponsor Bennington Youth

Wrestling. Relax in the indoor pool, whirlpool, and sauna or work out in our state of the art exercise facility, to reserve, call 802-440-9862, and ask for a room from the WRESTLING BLOCK to receive the discounted room rate of \$109 plus tax per room, per night. Room types are standard, and based upon availability.

Our concession stand will be open for breakfast and lunch offering great food @ reasonable prices. Your patronage is appreciated!

To increase your chances of receiving one of the limited 500 spots, **please pre-register!**
Registration will also be taken at the door upon availability.

Send the completed registration form and entry fee to:

Division: _____ (Leave Blank)

**Bennington Grappler's
C/O Jeff Whitesell
27 Asa's Way
North Bennington, VT 05257**

Weight: _____ (Leave Blank)

Registration Fee: \$20.00

Name: _____ Date of Birth: _____ Age: _____

Team Representing: _____ Grade: _____

Coach: _____ Cell Phone#: _____

Email address: _____

Address: _____

I hereby release the Bennington Youth Wrestling Organization, The Mt. Anthony Union School District, The Mt. Anthony Union High School, The Tournament Officials and Referees from any and all claims regarding any accident, injury, illness or liability that may be caused in conjunction with this tournament. I will be responsible in full for the health, safety and welfare of my child.

Signature of Parent/Guardian

Date

Pooling Data: You **must** fill in the below listed information. **Failure to complete the below listed information may subject the wrestler to compete within the advanced/premier division!**

Number of year's experience: 1 2 3 4 5 6 7+
(Circle One)

Ability Level: **Beginner** **Intermediate** **Advanced**
(Circle One)

2007/2008 Overall Record **Wins** _____ **Losses** _____

Career Record **Wins** _____ **Losses** _____

List the tournaments that the wrestler has competed in and their placement (example Cobleskill, NY 2nd place)

