UNADILLA VALLEY PEE WEE WRESTLING TOURNAMENT
(6 Man Round Robin)

DATE: January 30, 2010
CHECK-IN: All wrestlers must check-in between 6:30am and 8am.
WRESTLING BEGINS: Wrestling will begin as soon as brackets are completed.
New Format: Going back to using tree stands with current match and 2 on deck bouts listed by bout number.
LOCATION: Unadilla Valley Central School**,** 4238 St. Hwy 8 New Berlin, NY 13411
ENTRY FEE: $15.00 Pre-registration only LIMIT OF 300 WRESTLERS
PAYMENT: Entry fee and form must be received before **January 28, 2010**
MAKE CHECKS PAYABLE TO: UNADILLA VALLEY PEE-WEE WRESTLING CLUB
SEND TO: JULIE PEET 397 COYE BROOK RD. SOUTH NEW BERLIN, NEW YORK 13843
ADMISSION FEE: Adults: $2.00 students/children are free
FORMAT: 6 Man Round Robin (maximum 10% difference)
WEIGH-INS/CHECK-INS: There will be NO weigh-ins to start the tournament.
Please provide actual weight to allow us to group wrestlers before tournament.
Wrestlers weight may be challenged during the first round of tournament. Wrestler must be within 2 lbs. of weight listed on entry form. **There will be random weight checks at check in.**
TOURNAMENT DIRECTORS RESERVE THE RIGHT TO GROUP WRESTLERS AS NECESSARY WITHIN 10%.

DIVISIONS:

YOUTH:	(6 AND UNDER)
BANTAM:	(7-8 YRS.)
MIDGET:	(9-10 YRS.)
JUNIOR:	(11-12 YRS.)
INTERMEDIATE:	(13-14 YRS.)

** Wrestlers may compete in more than one division but not in two weight classes in the same division. Wrestlers competing in more than one division will forfeit 45 minute rest period. **1 form per division.**
WRESTLING RULES: NEW YORK STATE OFFICIALS
EVERYONE MUST HAVE PROOF OF AGE IF CHALLENGED, INCLUDING PERSON ISSUING CHALLENGE
TIE BREAK: wins/losses, head to head, total pins, total takedowns, total points scored.
BOUT LENGTH: 1-1-1 First point in overtime wins. Headgear and singlet preferred but not mandatory.
NO FOOD, DRINKS, OR COOLERS ALLOWED IN GYM
AWARDS: Trophies for 1st, 2nd, 3rd, 4th places, 5th & 6th place ribbon.
TEAM TROPHIES: 1st, 2nd, 3rd (fill out team sheet with 10 kids on day of tournament)
FOOD: breakfast, lunch, snacks and drinks will be available in the cafeteria.
TOURNAMENT DIRECTORS: Jim DuVall (607) 847-8472, Julie Peet (607) 783-2579

NAME:_____ DATE OF BIRTH:_____
ADDRESS:_____
AGE(as of 1/30/10)_____ PHONE: _____
DIVISION: _____ ACTUAL WEIGHT: _____
SCHOOL OR CLUB: _____
2008-09 RECORD: _____ HONORS:_____
ABILITY LEVEL: BEGINNER AVERAGE ADVANCED **(CIRCLE ONE)**
E-MAIL Address: _____

In consideration of this entry being accepted, I hereby release the Unadilla Valley Pee Wee Wrestling Club, Unadilla Valley Central School District, coaches and tournament officials from any and all claims, liabilities, and/or losses by me directly or indirectly in training for, traveling to or from, and/or participating in the Unadilla Valley Pee-Wee Tournament. I have insurance coverage for the wrestler.
Signature of wrestler:_____ Date:_____
Signature of parent/guardian:_____ Date:_____
******Call tournament directors with questions.**