

32nd Annual Dover Youth Wrestling Tournament

Saturday, January 31st, 2009

- Location:** Dover High School, Canal Road Dover Pennsylvania
Weigh-ins: **Friday 30th** 6:00pm-8:00pm (may change weight classes)
Saturday 31st 7:00am-8:00am (must make registered weight at Sat weigh-ins)
Entry Fee: \$17.00 per wrestler in each Wt. Division Registration/fee received by Jan 24th
\$20.00 Late or Friday walk-in Registrations
*****May enter more than one Division, but only one weight class*****
*****MUST BE READY TO WRESTLE WHEN CALLED*****
*****NO WALK-INS AFTER FRIDAY THE 30th*****
*****NO PHONE REGISTRATIONS WILL BE ACCEPTED*****
*****NO SATELITE WEIGH INS ALLOWED*****
- Eligibility:** Age as of January 1st, No Junior High Experience, No Exceptions
Wrestling: **Begins at 9:00am** sharp (6 mats will be run)
Double Elimination at Quarter Finals**
- Rules:** Modified PIAA Rules, length of bout 1,1,1. Overtime 1 minute, first point Wins. 30 second ride out if necessary.
- Awards:** Trophies award to 1st, 2nd, 3rd place and a medal for 4th place in every weight class.
A Division Champion T-Shirt will be awarded to the 1st place finalist of each weight class.
- Admission:** \$4.00 Adults, \$1.00 Students, Preschool Free
- Divisions:** **Tots** (6yrs and under) 40,45,50,55,60, HWT (75Max)
Div.I (7-8yrs) 45,50,55,60,65,70,75,80,85,90, HWT (105Max)
Div.II (9-10yrs) 55,60,65,70,75,80,85,90,95,100,110,120, HWT (135Max)
Div.III (11-12-13yrs)60,65,70,75,80,85,90,95,100,110,120,130,140, HWT (155Max)
WE RESERVE THE RIGHT TO COMBINE WEIGHT CLASSES
Make check payable to: **Dover Youth Wrestling Club**
Mail to : Shane Beamer 6 Meadow Rd Dover PA 17315 (717) 308-1694
Any questions call. For directions, visit our website www.ycywl.org
***NO REFUNDS----ANY CHECK FEES THAT ARE INCURRED ARE THE RESPONSIBILITY OF THE CHECK WRITER, NOT DOVER YOUTH WRESTLING**

Cut on dotted line

Wrestler's Name: _____ Weight Class: _____ Birth Date: _____

Division: TOT I II III (Circle One)

Address: _____ Phone # _____
Street City State Zip
School/Club _____ 2007-2008 Record _____

Wrestler Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

I hereby release the Dover Youth Wrestling Club, Dover High School District, Tournament Officials and Referees from all Liabilities and injuries, which may occur during the course of this tournament.