

2012 Long Island Schoolboy, Cadet and Girls Folkstyle Wrestling Championships

Saturday, March 31, 2012 at Island Trees Memorial Middle School
45 Wantagh Avenue South, Levittown NY 11756 (use rear entrance)

Tournament Director: Pete Butrico (516) 450-0070 email bbutrico@gmail.com
Mike Leonard (516) 297-3876 email bam197@aol.com

Registration and Weigh In on Friday, March 30, 2012:

Where: Island Trees Memorial Middle School, 59 Straight Lane, Levittown NY (use rear entrance by baseball field)

Time: 4 pm until 8 pm

Fee: \$25 – Cash or make check payable to **Nassau USA Wrestling**

Please note: At weigh in you will need entry form, fee and current USA card

Divisions by year of birth and weight classes:

| | | |
|-----------|-----------|---|
| Schoolboy | 1998-1999 | 70/77/84/91/98/105/112/120/128/136/144/152/160/175/190/210/265 |
| Cadet | 1996-1997 | 88/94/100/106/113/120/126/132/138/145/152/160/170/182/195/220/285 |
| Girls | All Ages | Madison Weights |

Check In for Schoolboy and Girls on Saturday, March 31, 2012: 7:30 AM **Wrestling begins:** 8 AM

Check In for Cadet on Saturday, March 31, 2012: 12 PM with wrestling to follow afterwards

Directions for Tournament:

Location: Island Trees Memorial Middle School, 45 Wantagh Ave. South, Levittown NY

Directions: Hempstead turnpike to Wantagh Avenue South, School is on the left – **USE REAR ENTRANCE**

Tournament Rules:

1. USA WRESTLING sanctions this event and competitors must present a USA card to participate.
2. ONLY coaches with USA Cards will be permitted on mats. 2 coaches per corner - maximum.
3. Headgear (recommended but not required), singlet or gym shorts, wrestling shoes or sneakers required.

Not responsible for lost or stolen items. We will try to give each wrestler 2 matches.

-----PLEASE PRINT-----

NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____

CLUB OR SCHOOL: _____

GRADE: _____ DOB: _____ AGE: _____ WEIGHT: _____

Placed in 2012: Weight Class _____

Enter Place in: County Qualifier _____ County / Private State / Catholic State _____ Public States _____

I hereby give my child, _____ permission to participate and compete in this tournament. I assume full responsibility and liability for any and all injuries my child may sustain during the course of the event. I will not hold the School District, USA Wrestling or any individual working at the tournament responsible for any situations or injuries that may arise before, during or after the tournament. I understand that in the event of an accident or injury, only emergency medical care will be provided and I authorize the rendering of such medical care be provided as may be required.

PARENT SIGNATURE: _____