

Calhan Bulldogs

Feb. 27, 2010



4-14 years

Youth Wrestling Tournament

LOCATION: Calhan School Gym 800 Bulldog Dr Calhan, CO 80808

REGISTRATION & WEIGH-INS: Friday, February 26th 6:00-7:30 PM
No Saturday weigh-ins

SATELLITE WEIGH-INS: To make the weigh-in process easier on parents and wrestlers, satellite weigh-ins will be allowed. Wrestlers must weigh in with their club the week of February, 22 - 26. The coaches must use the attached form and email their roster of wrestlers participating in the tournament by Friday, February 26 at 5PM to Jake Firebaugh at jfirebaugh@yahoo.com. Please fill it out completely! Coaches are responsible for writing weight/age on wrestler's right arm. If a wrestler wishes to change their registered weight they will need to weigh-in during weigh-ins February 26th in Calhan. **Note:** Tournament directors reserve the right to check any wrestler's weight and age they may deem questionable. Please bring proof of age in case questions arise.

Entry Fee: \$10/Wrestler

General Admission: \$2/Adult ~ \$1/Child

First Round: 9:30am

*****ALL teams with satellite weigh-ins must check in by 8AM, Saturday morning.**

Please bring signed entry forms for all wrestlers on roster and (1) payment (checks made out to Calhan youth wrestling).

Notification of cancellations are appreciated!

AGE & WEIGHT DIVISIONS: *Age will be determined as of January 1st 2010*

4 & under and 6 & under: 4-man brackets (every wrestler will receive an award)

8 & under, 10 & under, 12 & under, 14 & under: depending on weight and numbers, we will use 8-man brackets, 4-man brackets or round robins.

*All wrestlers will be grouped in weight classes after weigh-ins are completed.

RULES: (3) 1-minute periods; High school rules apply, ties broken with 1st point scored in overtime.

AWARDS: 1st place Trophies, Medals for- 2nd, 3rd, 4th place in each age division, weight class. Sportsmanship trophy.

CONCESSIONS: Available throughout the tournament.

Question please contact: Jake: 719-510-4064 OR Gerald: 719-749-9044/ 719-660-2802

I certify _____ has my permission to compete in the Calhan Youth Wrestling Tournament on February 27, 2010. I hereby accept full responsibility for his/her behavior and participation. Good sportsmanship will be displayed throughout the day as well as the rules of a fair wrestling match. I will not hold the Calhan Youth Wrestling Club, Calhan School District, Volunteers, Faculty, Officers and members thereof for any accident or injury occurring at the tournament on February 27, 2010 or during weigh-ins on February 26, 2010

Wrestler's Name: _____ Age: _____ Actual Weight: _____

Wrestler's Team: _____ Parent/Guardian: _____

Date: _____ Waiver must be completed and entry fee paid for wrestler to compete.

Calhan Youth Wrestling Tournament

February 27, 2010

	First Name	Last Name	Club	Age (as of Jan 1 2010)	Actual Weight	Paid
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						

Coach name (Printed)

Coaches signature

***Email to: jfirebaugh@yahoo.com by 5pm February 26th, 2010

Paid: _____
(Amount)

(Check #)

(Cash)