

MUSTANG WRESTLING CLASSIC
Hosted by the
FORT MORGAN WRESTLING CLUB
Saturday February 25, 2012
Fort Morgan High School
Tournament will begin promptly at 9:00 AM

****WE WILL NOT ACCEPT REGISTRATIONS OR WEIGH-INS THE MORNING OF THE TOURNAMENT!****

Satellite Weigh-ins must be submitted to Sally Templeton by 5:00pm on Friday the 24th. On site weigh-ins will be conducted from 6:00pm – 8:30pm on Friday the 24th. Bracketing will not be redone for registered wrestlers who do not attend; the referee will claim a forfeit and opponent will receive an automatic win.

Registration Tables will be at the lower level doors of the Fort Morgan High School Gym, no entrance at upper lobby doors will be allowed.

Entry Fee: \$20 per wrestler, \$5 per coach or adult, \$3 per student

Admission:

Awards: Medals and T-Shirts will be provided for 1st place champions. Medals will be provided for 2nd, 3rd, and 4th place.

****WRESTLERS AGE ON JANUARY 1, 2012 DETERMINES AGE GROUP****
BIRTH CERTIFICATE MUST BE AVAILABLE UPON REQUEST

Bracketing committee will determine brackets at registration.

Wrestlers will be allowed to wrestle in only **one** weight class and age group. Bracketing will be done at random. All ages will be eight man brackets. Weight classes with 3 or less wrestlers will join the next higher weight class or as determined by the Bracketing Committee. All wrestlers wrestle a minimum of 2 matches.

Rules: Collegiate rules will be followed with the following exceptions:

1. Ages 4-8 will wrestle three 1 minute periods.
Ages 9-15 will wrestle three 1 ½ minute periods.
2. Ties will be broken with new overtime rules applying.

FOOD AND CONSESSIONS WILL BE SOLD ALL DAY

(lunch will be provided for all paid wrestlers)

**For additional information contact: Sally Templeton at 970-370-0937 or
peewee_wrestling@hotmail .com**

Mustang Classic 2012

The undersigned parent/guardian consents to the participation of the named wrestler in the Mustang Classic Wrestling Tournament. The wrestler and his/her parent/guardian release from responsibility, any damages or injuries suffered directly or indirectly in the Tournament on February 25, 2012.



Proof of age must be available upon request.

(PLEASE PRINT)

WRESTLER'S NAME _____

ADDRESS _____

WRESTLING CLUB or TOWN _____

AGE (As of Jan. 1, 2012) _____ WEIGHT _____

PARENT OR GUARDIAN SIGNATURE _____

DATE _____ ADDRESS _____

WRESTLER'S SIGNATURE _____

(To be completed by staff only)

Wrestlers Name _____.

Age _____.

Weight _____.

