

# SEASONS' BEATINGS

## Biglerville 28th Annual Holiday Tournament

### Saturday December 15<sup>th</sup> 2018

#### DOUBLE ELIMINATION TOURNAMENT

**Location:** Biglerville High School, 161 North Main Street, Biglerville, PA 17307  
Located 7 miles north of Gettysburg, PA on Rt. 34 (Parking at rear and as available in front lot)

**Weigh-ins:** Friday, December 14<sup>th</sup> 6:00pm-8:00pm at the Biglerville High School Cafeteria. (Walk-ins permitted)

**Wrestling:** Wrestling will begin at 9:00am

**Entry Fee:** \$25.00 for on-line or pre-registered wrestlers. (Team rate available for 10+ wrestlers)  
For team rate and registration, please email tournament director Dan Bishop e18fems@yahoo.com

## ONLINE REGISTRATION (CLICK HERE)

### (NO WALK-INS SAT 12/15/18- NO REFUNDS)

**Registration Only:** at [www.pywrestling.com](http://www.pywrestling.com) (Look for Seasons Beatings Banner)  
Online Registration closes midnight, Thursday, December 13<sup>th</sup>. Or Mail to BYWC, PO BOX 603  
Biglerville, PA 17307 (received by Thursday, December 13<sup>th</sup>).  
**(Limited to first 350 wrestlers)**

Double bracketing is permitted; however, matches will not be held and the wrestler cannot register twice in the same division.

**Admission:** Adults (16 years old and up) ---- **\$5.00** (coaches pay),  
Students (6 years old and up) ---- **\$2.00**  
Toddlers (5 years old and under) ---- **Free**

**Awards:** Top 3 place winners will receive trophies and 4<sup>th</sup> place will receive a medal.

#### **Divisions & Weight Classes: (Age as of the day of the tournament)**

Pee Wee (6 & under): 40, 45, 50, 55, 60, UNL (80 lbs. max.)

Bantam (7&8): 45, 50, 55, 60, 65, 70, 75, 80, 85, UNL (110 lbs. max.)

Midget (9 & 10): 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 110, UNL (150 lbs. max.)

Junior (11 & 12): 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, 130, UNL (170 lbs. max.)

Intermediate (13 & 14): 75, 80, 85, 90, 95, 100, 110, 120, 130, 140, 150, 160, UNL (220 lbs. max.) **NO Varsity Exp.**

*(Weight Classes may be combined to ensure that there are at least 3 wrestlers per bracket.)*

**Rules:** PIAA modified (headgear optional), singlet is required. Skin checks by referees. Bouts 1-1-1 for all divisions. 'Sudden Death OT - Untimed'. Proof of age required if challenged (including challenger).

**Concession:** Concessions available all day.

**For More Information:** Text/Call Dan Bishop (301)-928-0974 or email e18fems@yahoo.com

# 2018 Holiday Tournament

## REGISTRATION FORM (For Biglerville Wrestlers Only)

\*\*\* Please verify that all online information is checked and correct prior to submitting online form \*\*\*

Participant Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Age: \_\_\_\_\_ (As of Dec. 15, 2018)

Division: \_\_\_\_\_ Weight Class: \_\_\_\_\_ Wrestling Club/School: \_\_\_\_\_

**If Double Bracketing:** Division: \_\_\_\_\_ (Cannot be same division as above) Weight Class: \_\_\_\_\_

Address of Wrestler: \_\_\_\_\_

\_\_\_\_\_

Emergency Contact #1: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Emergency Contact #2: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### AGREEMENT:

I, the undersigned and as a legal parent/guardian for \_\_\_\_\_ (wrestler/participant), a minor, request that he/she be admitted to participate in the 2018 Biglerville Holiday Tournament as described herein. I do hereby agree to release, discharge and hold harmless the Biglerville Youth Wrestling Club (BYWC), Upper Adams School District (UASD), and all of its coaches, assistants, agents, directors, administration, and employees from all causes, liabilities, damages, or claims in the course of competition and/or activities held in connection with the tournament described herein.

I understand that in the event that my child is injured, he/she may be treated on site by a Doctor or certified EMT/Trainer until such a time when an emergency contact can be reached for further instruction (if required).

I understand that the wrestler/participant who does not abide by the rules and regulations promulgated by the tournament, or the Biglerville Wrestling Club, or the School District or the Booster Club is subject to discharge without reimbursement or recourse.

With the below signature, I accept all terms and conditions as outlined above.

Legal Parent or Guardian: \_\_\_\_\_  
(Print full name)

Signature of Legal Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_