



**SEPA Reverse for the Cure
Round Robin Tournament
Saturday, October 27, 2018**

Carl Sandburg MS - 30 Harmony Road, Levittown, PA 19057

Website: SEPAwrestling.com / email: jerb@mullerbev.com

WEIGH INS Saturday 7:00am-8:00am (All Divisions and Walk ins)
A singlet must be worn at weigh-ins.
Any questionable skin conditions must have proper physician's paperwork no more than 10 days from the date of tournament.

WRESTLING START TIME: Wrestling will start at 9:00am

REGISTRATION: Forms can either be mailed to the address below, or filled out Saturday at weigh-ins.

UNIFORMS – A singlet or two piece uniform will be permitted.

ENTRY FEE - Pre- registered - \$25.00. Must be received by **10/25/2018**
Walk-ins \$30.00

Make checks payable to: SEPA Wrestling.
Mail to: SEPA Wrestling
PO Box 7138
Penndel, PA 19047

WEIGHT CLASSES: MADISON SYSTEM (Age as of Date of the Tournament), College out of bounds rules

HIGH SCHOOL – 18 and Under (1 ½, 1 ½, 1 ½ - minute periods)

INTERMEDIATE – 14 and Under (1, 1, 1 - minute periods)

JUNIORS – 12 and Under (1, 1, 1 - minute periods)

MIDGET – 10 and Under (1, 1, 1 - minute periods)

BANTAM – 8 and Under (1, 1, 1 - minute periods)

SEPA Reverse for the Cure 10/27/2018

Name: _____ Actual Weight (filled out at weigh-ins) _____

Age _____ Birth Date _____

Division (Bantam(8) –Midget(10) – Juniors(12) – Inter.(14) – HS) _____

Club Affiliate _____

Address: _____

City _____ St _____ Zip _____

Phone _____

Email Address _____

In consideration of this entry being accepted, I hereby for my son/daughter and myself waive and release any and all rights against claims for damages I have against the Southeast PA Wrestling Team, Neshaminy School District, and anyone involved with the tournament and assigns for any injuries suffered by my son/daughter or myself at said tournament.

Parent/Guardian signature: _____ Date _____

Wrestler signature: _____ Date _____