



Location: Chautauqua Lake Central School, 100 North Erie Street, Mayville, New York 14757

When: Saturday, December 8

Weigh Ins: Friday, Dec 7, 6–8pm and Saturday, Dec 8, 7–8am and 10:30-11:30 am @ Chautauqua Lake Central School
Satellite - Friday, Dec 7, 6–8pm @ Lockport High School West, 319 West Avenue, Lockport, NY 14094
Skin checks at time of weigh ins. Bring proper physician's release for any skin conditions.

Start Times: Split Start - 6/u and 9/10 at 9:00 am sharp, 7/8 and 11/12 at approx 1 pm. If schedule allows we will start the afternoon session 1/2 hour early. Afternoon wrestlers should be prepared to start wrestling by 12:30.

Registration: \$25 Pre-registration only. No walk-ins.
Online registrations at pywrestling.com.
Mail in registrations to: WRCL, PO Box 333, Ashville, NY 14710. Must be postmarked by 12/3.
Wrestlers are allowed to enter 2 age divisions, please fill out 2 separate registrations.

Admission: Adults \$3.00 - Students \$2.00

Awards: Trophies given to top three placers. Team Trophies to top three teams (choose your 10 wrestlers day of tourney).

Matches: 5-6 Man Round Robin. 1-1-1, sudden death OT, 1 minute on feet then two 30 second ride outs.

Rules: Certified Referees. 5-6 Man Round Robin – Madison style pairing.
Wrestlers must not exceed stated weight. No allowance.
Brackets will stay within 10% weight difference.
Tournament reserves the right to combine age and/or weight classes if required.
Headgear required. Caps required for longer hair.

Divisions: 6/U, 7/8, 9/10, 11/12. Age as of day of tournament. Be prepared to show proof if contested.

Concessions: Available all day.

Host Hotel: Chautauqua Suites for Friday night, \$89.99 plus tax. Book by November 30 for this rate.
For questions email wrclw@yahoo.com or call Chris Fairbank at 716-338-2087.

ONLINE REGISTRATION [CLICK HERE](#)

NAME: _____ DOB: _____ AGE: _____
WEIGHT: _____ DIVISION: _____ LAST YEAR'S RECORD: _____ YEARS WRESTLED: 0 1 2 3 4 5 6 7 8
ADDRESS: _____
PHONE: _____ EMAIL: _____
SCHOOL/CLUB: _____ GRADE IN SCHOOL: _____

I would like to compete in the NY Top 100 Rankings: YES NO (circle one)
NY Top 100 competing weight class (increments of 5lbs, wrestler must be at or under this weight): _____ NY
Top 100 competing age group (wrestler will only be ranked at one): _____

For complete rules on the NY Top 100 rankings, please visit [hp://www.nyouthwrestling.com](http://www.nyouthwrestling.com)

In consideration of this entry being accepted, I hereby, for my child and myself, waive and release any and all rights and claims for damages I may have against the Chautauqua Lake Central School District, Village of Mayville, WRCL Youth Wrestling Club, its agents, representatives, successors, and anyone involved with this tournament and assigns for any injuries suffered by my child or myself at said tournament. I also will take responsibility for any and all damages done by my child at said tournament. I also understand that my child must be covered by a health/injury insurance policy as a requirement for participating in this tournament and I attest that my child is covered by a health/injury insurance policy.

PARENT SIGNATURE: _____

NY TOP 100 TOURNAMENT