

# 7<sup>th</sup> Annual Spartan Shootout Novice Wrestling Tournament 1<sup>st</sup> and 2<sup>nd</sup> Year Wrestlers Only Sunday, January 27th, 2019



Laurel High School, 2497 Harlansburg Road, New Castle, PA 16101

## All wrestlers earn trophies!

This tournament is designed to help the beginning wrestler by providing them with mat experience to improve their wrestling skills.

**Eligible: Must be 12 or younger. First and Second Year wrestlers only!!!**

**Time: Wrestling starts at 1:00 PM (Doors open at 12:00 p.m.)**

**Weigh-ins: Honor weigh-ins (Coach must write age & weight on left arm of wrestler)**

**Rules: Wrestler must earn 12 points for to receive their award.** (Wrestlers will receive 5 points for a win and 3 for a loss).

**Wrestlers will be matched up (+/-) 5lbs and (+/-) 1 year** (or as close as possible with parent or coach permission)

**Wrestling: All matches will be 3, 1 minute periods.**

**Awards: All wrestlers will earn a Trophy.**

**Admissions: Adults: \$3.00 Children: \$1.00**

**Refreshments: Concession stand will open at 12:30 pm and be available throughout the tournament.**  
(No food or beverages will be allowed in gym area)

**Entry Fee: Pre-Registration \$20.00 non-refundable.** (Checks payable: Laurel Youth Wrestling)

**Walk-ins Welcome! Walk-in registration \$25 (Limited to first 250 wrestlers)**

**Pre-registration must be received by Thursday, Jan. 24th, 2019**

## **ONLINE REGISTRATION (CLICK HERE)**

**Mail in Entries to:** Laurel Youth Wrestling (c/o: Ryan Miles)  
2488 Eastbrook Rd.  
New Castle, Pa. 16105

**Contact for Info: Ryan Miles: [GRyanMiles@gmail.com](mailto:GRyanMiles@gmail.com)**

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**(Please Print)**

**Wrestler Name:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **School or Club:** \_\_\_\_\_

**Age on Jan 27, 2019:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **Email:** \_\_\_\_\_

I hereby give my permission for the above named wrestler to participate in the Spartan Shootout Novice Wrestling Tournament. I also release and waive any and all rights, against the Laurel Youth Wrestling Association, Laurel School District, Tournament officials and additional parties involved with this event for any and all injuries or losses suffered to my wrestler and/or my family while participating in/at this tournament.

**Parent/Guardian Signature:** \_\_\_\_\_