

SOMERSET JUNIOR WRESTLING
TEAM DUALS TOURNAMENT

- WHEN:** Sunday Feb 17, 2019 Wrestling will start at 10:00 am after coaches meeting.
- PLACE:** Somerset Area Senior High School, 645 South Columbia Avenue, Somerset, PA 15501
- RULES:** PIAA Modified, Headgear Optional **PERIODS:** 1-1-1, Sudden Death Overtime
- ENTRY FEE:** \$200.00 per single team or \$350.00 if entering 2 teams
Make checks payable to **Somerset Wrestling Boosters**
- DEADLINE:** Entry will close upon receipt of the first 16 (8 per division) paid commitments or February 10, 2010, whichever comes first.
- ELIGIBILITY:** Wrestlers must be in grades K – 6th. Must be registered in team’s school district (this includes current co-ops in the varsity wrestling program.) **IF QUESTIONED, YOU MUST PROVIDE PROOF.**
- FORMAT AND AWARDS:** This is a dual meet “Team Tournament.” We will provide team trophies for the first three place winners in each division. We are striving for 8 teams (maximum) per division.
- DIVISIONS AND WEIGHT CLASSES:**
JV (K – 3RD GRADE)
WEIGHT CLASSES: 40, 45, 50, 55, 60, 65, 70, 75, 85, 95,105, HWT (140 MAX)
- VARSITY (4TH – 6TH GRADE)**
WEIGHT CLASSES: 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 110, 115, 125, 135, HWT (185 MAX)
- ROSTER:** A completed team roster for the above weight classes must be submitted via phone, mail or email by February 13, 2019. (No limit on number of extra/alternate wrestlers on roster, but no exhibition matches will be wrestled.) A signed waiver (attached) must also be received for each of the wrestlers participating in the dual team tournament at or before weigh-ins.
- ***Only one weight class and division per wrestler. JV aged wrestlers may wrestle in Varsity class.*****
- WEIGH IN:** February 17, 2019 @ 7am – 9 am ---Must weigh in as a team. **NO WEIGHT ALLOWANCE**
- ADMISSION: Adults \$4.00 Students: \$1.00 3 Coaches per school admitted free.**
- FOOD WILL BE AVAILABLE IN THE CAFETERIA ALL DAY. NO FOOD OR DRINKS IN THE GYM!**

Contact Andy Hagans with any questions
417 High St. Somerset, PA 15501
Phone - 814-521-3430
Email - andrew.hagans@yahoo.com

Name of School: _____

Name of Coach/Contact: _____ Phone: _____

Please specify number of teams in each division.

Division: JV _____ **Varsity** _____

**SOMERSET LITTLE EAGLE WRESTLING
ELEMENTARY DUALS WRESTLING TOURNAMENT**

JV WAIVER

In submitting this application, I the undersigned consenting adult hereby give the undersigned wrestling permission to participate/wrestle in the Somerset Wrestling Tournament. I hereby waive and release the Somerset Wrestling Boosters, their Officers, Somerset Area School District, Tournament Officials, Referees, Sponsors, Coaches, and anyone connected with the Tournament. My signature acknowledges that I have read and

fully understand the terms and conditions of the agreement.

TEAM NAME _____

Weight	Wrestler's Name	Wrestler's Signature	Parent/Guardian Signature	Date
40				
45				
50				
55				
60				
65				
70				
75				
85				
95				
105				
HWT				

**SOMERSET LITTLE EAGLE WRESTLING
ELEMENTARY DUALS WRESTLING TOURNAMENT**

Varsity Waiver

In submitting this application, I the undersigned consenting adult hereby give the undersigned wrestling permission to participate/wrestle in the Somerset Wrestling Tournament. I hereby waive and release the Somerset Wrestling Boosters, their Officers, Somerset Area School District, Tournament Officials, Referees, Sponsors, Coaches, and anyone connected with the Tournament. My signature acknowledges that I have read and fully understand the terms and conditions of the agreement.

TEAM NAME _____

Weight	Wrestler's Name	Wrestler's Signature	Parent/Guardian Signature	Date
60				
65				
70				
75				
80				
85				
90				

95				
100				
105				
110				
115				
125				
135				
HWT				