

21st ANNUAL KITTATINNY SUMMER WRESTLING TOURNAMENT

SATURDAY, JULY 21ST, 2012 – FORMAT IS ROUND ROBIN

Location: Kittatinny Regional High School, 77 Halsey Road, Newton, NJ 07860

Entry Fee: \$20.00 Pre-Registered Post marked by 07/18/2012
\$25.00 Walk-Ins (Collected at Weigh-Ins)

Make check payable to: *Hampton Sandyston Wrestling Club*

Pre-Registration can be mailed to the following address:

HSWC C/O Michele Maio

13 Hampton Downes

Newton NJ 07860

*******ANY RETURNED CHECK AFTER TOURNAMENT \$25.00 fee to be added*******

Any questions please call: Michele Maio at 862-266-3816 or ppm423@aol.com
Michele Molfetto at 973-579-7525 or tdc3@ptd.net

Local hotel information can be provided for wrestlers coming from long distances.

*****For long distant travelers, satellite weigh ins available, please contact Michele Maio*****

Weigh-Ins: At Kittatinny Regional High School, Pre-Registered & Walk-Ins will be Friday July 20th from 2:00 to 4:00pm in the wrestling room. Entrance will be around the back of the high school, Pre-Registered Only on Saturday July 21st, 2012 for weigh-Ins, which will be from 7:30 to 8:30am.

Head Gear mandatory, singlets are optional, but must have shorts and tight fitting tee shirt to wrestle in.

Medals for 1st thru 3rd and there will be a Outstanding Wrestler Trophy awarded for each division.

Tournament Director reserves the right to combine weights to make proper size brackets.

Schedule: Gym will open at 8:30am. Wrestling will begin at 9:30am on 5 mats, all divisions
3 in the main gym and 2 in the JR high gym.

FOOD AND DRINKS WILL BE AVAILBLE ALL DAY!!!!!!

Admission: \$3.00 for adults, \$2.00 for children and seniors.

Division: THE MADISON SYSTEM WILL BE USED TO DETERMINE WEIGHT CLASSES
A = 6 & Under MATCHES WILL BE 1-1-1 FOR 6,8,10 & 12 & Under divisions
B = 7 & 8 1-1:30-1:30 FOR 14 & Under and HS DIVISION
C = 9 & 10 ROUND ROBIN Brackets may vary in size; each wrestler is guaranteed 3 matches.
D = 11 & 12 (AGE AS OF DAY OF TOURNAMENT, HS DIVISION FOR 2011/12 YEAR)
E = 13 & 14
F = HS DIVISION

Wrestlers Name_____ Home Phone_____ Cell_____

Age_____ DOB_____ Grade_____ Current WT_____

(CIRCLE ONE DIVISION) 6 & Under 7&8 9&10 11&12 13&14 High School

Street_____ City_____ State_____ Zip_____

Team, School or Club to be listed on brackets: _____

E-Mail Address: _____

I, the undersigned, hereby declare that I am accepted to participate in the Kittatinny Recreational Wrestling Tournament. I do so at my own risk and of my own free will, I will not , in any way, hold liable the sponsors, tournament officials, Hampton TWP, Kittatinny School District, or referees, for any injuries or loss that I might receive, directly or indirectly, while traveling to or from or competing therein.

PARENT/GUARDIAN SIGNATURE:_____ DATE:_____