

# Lil-Charger Wrestling Tournament

## Chariton, Iowa

Where: Chariton High School, 501 N Grand  
When: **February 14<sup>th</sup> 2010**  
Weigh Ins: PK-2 and 5th-6th 10:00am-11:00am  
3<sup>rd</sup> & 4<sup>th</sup> and 7th-8th 1:30pm-2:00pm

PK-2 and 3<sup>rd</sup>-4th will wrestle in the upper gym, 5<sup>th</sup> -8<sup>th</sup> in the lower gym!  
Wrestling will start at approximately 11:45 or 12:00.

Awards: **TROPHIES AWARDED FOR ALL PLACES**  
Fee: \$11.00 Pre register  
\$13.00 Call-ins Will accept call- ins until full  
**NO WALK-INS ACCEPTED**

Checks payable to: Chariton Wrestling Club  
Mail form to: John Harberts  
1011 Mallory Drive  
Chariton IA. 50049  
Or call 641-774-8266 (if leaving a msg, you must receive a return call)  
E-mail: dharberts@mckinleyinc.net

**Deadline: February 11, 2010 Limited to 350**

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Name: \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

City/School: \_\_\_\_\_ Phone: \_\_\_\_\_

Experienced or Beginner: \_\_\_\_\_ DOB: \_\_\_\_\_

Wins \_\_\_\_\_ Losses \_\_\_\_\_ Weight: \_\_\_\_\_ **Must be w/in 3 lbs.**

I certify that \_\_\_\_\_ is in the \_\_\_\_\_ grade and born on the above date. My son/daughter has my permission to participate in the Chariton Wrestling tournament and I will take full responsibility for any accident or injury along with his behavior while participating in the tournament

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_