



Wendall Williams Youth Wrestling Tournament

400 wrestler maximum



WHEN: FEBRUARY 12, 2012
WHERE: NEVADA HIGH SCHOOL (1001 15TH Street; Nevada, IA)

ENTRY FEE: \$15.00/ Deadline for mail ins Feb 8th
 Walk-ins welcome \$20 (400 wrestler maximum)
 No refunds- Doesn't include insurance

DIVISIONS: Pre K-K/1-2/3-4/5-6/7-8

WEIGH INS: All divisions 9:30-11:00 **WRESTLE AT 12:00**

RULES: 3- one minute periods with O.T
 4 man brackets

AWARDS: Medals Pre K-8th / 1st Place- Champions T-shirt and Medal

****We will be running two gyms this year. 5th-8th grade will be wrestling in the middle school gym which is attached to the high school.****

*******Rules and Procedures*******

1. Rules are as followed by IHSAA Rules
2. The use of headgear is OPTIONAL but still ENCOURAGED
3. Decisions of the referee will be final- absolutely no exceptions
4. Individual meet- no team scores will be kept
5. Any person causing trouble or doing damage on school property will be held will be held responsible for such damage and be ruled ineligible for the rest of the day
6. Participants are responsible for their own items (clothing, radio, etc)
7. Admission will be charged to everyone except wrestlers and workers
8. THERE WILL BE NO EXCEPTIONS TO THESE RULES. PLEASE RESPECT THE PEOPLE WHO HAVE VOLUNTEERED THEIR TIME TODAY.

Send Registrations & Questions to:

Joe Bottorf
1425 W 6th Street
Nevada, IA 50201

515-231-3590
Make Checks Payable to:
Nevada Booster Club

WENDALL WILLIAMS BOOSTER CLUB WRESTLING TOURNAMENT OFFICIAL ENTRY FORM

Make sure to put club name! We will do our very best to not have same club wrestle each other

Name: _____ Age: _____ Grade: _____

Address: _____ City: _____ State: _____

Zip Code: _____ Phone: _____ Cell: _____

School: _____ Club: _____

Record: _____ Weight: _____ # Years Wrestling: _____

In consideration of my accepting this entry, I hereby, for myself, my heirs, executors & administrators, waive and release any and all rights and claims for damage I may have against the Nevada Booster Club of Nevada Community School, their subcommittees, agents and representatives, and assignees, for any and all injuries suffered by me at said tournament.

NO ONE WITHOUT A SIGNED WAIVER WILL BE ALLOWED TO PARTICIPATE IN THIS TOURNAMENT.

PARENT/GUARDIAN SIGNATURE

DATE

EMERGENCY PHONE(S)