VAN METER BULLDOGS
YOUTH WRESTLING TOURNAMENT
SATURDAY, FEBRUARY 27, 2010

VAN METER HIGH SCHOOL- 520 FIRST AVENUE -VAN METER, IA
(8 MILES WEST OF DES MOINES)

4 - MAN ROUND ROBIN FORMAT
OLYMPIC STYLE MEDALS AWARDED IN SENIOR DIVISION
TROPHIES AWARDED FOR ALL PLACES IN OTHER DIVISIONS

DIVISIONS: **SENIOR (7-8)** **JUNIOR (5-6)**
NOVICE (3-4) **MIDGET (K-2)**

WEIGH-INS: **SENIORS AND JUNIORS 7:00AM-8:00AM**
WRESTLING STARTS AT 9:00AM
NOVICE AND MIDGETS 10:00AM-11:00AM
WRESTLING STARTS AT 12:00PM

MATCHES: **SENIOR:** TWO-ONE-ONE MINUTE PERIODS
ALL OTHER DIVISIONS: 3 ONE MINUTE PERIODS

COST: **$15.00 FOR MAIL IN ENTRIES RECEIVED BY FEBRUARY 23**
$20.00 WALKINS (WILL ONLY ACCEPT FIRST 250 REGISTRATIONS)
MAKE CHECKS PAYABLE TO:
VAN METER YOUTH WRESTLING

CONCESSION AVAILABLE ALL DAY
NO REFUNDS FOR CANCELLATION DUE TO WEATHER

MAIL ENTRY AND FEE TO:
Debbie Hale
PO Box 61
Van Meter, IA 50261
(515) 418-2526

QUESTIONS CALL:
Pat Corcoran (515) 996-9320 pocork@msn.com
Jake Cole (515) 321-7683 jacobscole3@yahoo.com

NAME:_____ADDRESS:_____

CITY/STATE/ZIP: _____

AGE:_____ DIVISION:_____ WEIGHT:_____

CLUB: _____

YRS EXPERIENCE _____ THIS YEARS RECORD W____ L____

This tournament does not provide insurance. I certify that _____ is in _____ grade. I accept full responsibility for his or her behavior and grant my permission to wrestle in the Van Meter wrestling tournament. By signing this release, I hereby, for myself, my child, his/her heirs, executors and administrators do waive and release all rights and claims for damages I may have against Van Meter High School and/or the Van Meter Youth Wrestling club and its representatives for any or all injuries suffered at this tournament.

PARENT OR GUARDIAN SIGNATURE _____ DATE:_____