

# WEST MARSHALL ATHLETIC BOOSTERS KID'S WRESTLING TOURNAMENT

Friday, December 18, 2009

West Marshall High School, 3rd Street NW, State Center, IA

WEIGH-IN: 4-5:30 PM

FIRST ROUND: 6:00 PM or as close possible

DIVISIONS: K – 2nd Grade

3rd - 4th Grade

5th - 6th Grade

7th - 8th Grade

CLASSES: Brackets will be pre-bracketed. Must be within 3 lbs of registration weight or you will forfeit. No refund.

## ROUND ROBIN FORMAT

AWARDS: CHAMPION T-SHIRT AND MEDALS TO ALL WRESTLERS  
AWARDS WILL BE HANDED OUT AFTER WEIGHT CLASS IS COMPLETED.

ENTRY FEE: \$15.00 postmarked by Dec. 15th – call-ins until Dec. 17th at 6:00 p.m.

First 300 wrestlers - Absolutely no walk-ins  
(Please make checks payable to WM Athletic Boosters)

SEND ENTRY FEE AND COMPLETED FORM TO:

Todd Kline  
1127 230th St. ~ State Center, IA 50247

For More Information Call: Todd Kline (641)483-2361 – Home or 641-485-0433 – Cell  
tsrkline@partnercom.net

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Name \_\_\_\_\_ Weight \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Email \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Grade \_\_\_\_\_ Birthdate \_\_\_\_\_ School \_\_\_\_\_

Record/Experience \_\_\_\_\_

WAIVER: In consideration of my son or daughter entering this tournament, I hereby, for myself and my child, his heirs, executors and administrations, waive and release any and all rights and claims for damage I may have against the West Marshall Athletic Boosters, West Marshall Community School, its sub committees, agents, representatives and assigns for any and all injuries suffered by my child at said tournament. Signed:

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_