



WBW YOUTH WRESTLING TOURNAMENT

Sunday, Feb 10, 2019

West Branch High School, 900 West Main St., West Branch, IA

- Entry Fee:** \$15.00: MUST BE PRE-REGISTERED – NO PHONE INS, WALK-INS or EMAIL ENTRIES
Make checks payable to: WBW
- Deadline:** Entries must be *received* by Thursday, February 07, 2019 (get them in early!)
Mail To: WBW, P.O. Box 185, West Branch, IA 52358
- Weigh-Ins:** All wrestlers will weigh in from 8:00 AM – 9:00 AM
Wrestling will begin at approximately 9:30 AM
Wrestlers must be within 3 pounds of their registered weight or you may forfeit your entry
- Matches:** 1-1-1 for Pee Wee, Bantam and Novice, 2-1-1 for Juniors, OT if required
Each wrestler must carry their own insurance.
- Brackets:** 4 wrestler Round Robin - every attempt will be made to make the most competitive brackets possible
Note any special requests on entry form (willing to wrestle up, give up a little weight, beginner, etc) to help bracketing
Trophy, Wall Chart for 1st place; medals for 2nd-4th places.
- Details:** **Certified Refs, Concessions all day, No coolers in gym please**
Limited to the first 260 wrestlers

Team Competition: TEAM COMPETITION with Trophies for 1st, 2nd and 3rd places.

Questions? Call Mike Thomas (319) 936-8426

2019 WBW Youth Wrestling Tournament Registration Form

PLEASE PRINT NEATLY ON THIS FORM – the brackets are made from this information

Division: (CIRCLE ONE) Super Pee Wee (PreK-K) Pee Wee (1-2) Bantam (3-4) Novice (5-6) Junior (7-8)

Name _____ **DOB** _____ **Club** _____

Grade _____ **Age** _____ **Weight** _____ **Yrs of wrestling** _____ **Record wins/losses** _____ ***required**

Address _____ **City** _____ **State** _____ **Zip** _____

Email _____ **Phone** _____

Other Notes: _____

I verify that my above named son/daughter was born on the above stated date and give my full permission for him/her to compete in the 2018 West Branch Wrestling Club Tournament. I take full responsibility for my son's/daughter's actions on and off the mat. I also understand that West Branch Community Schools, West Branch Wrestling Club members and volunteers are not liable for injuries or lost or stolen items incurred while participating in this event.

Parent/Guardian Signature: _____ **Date** _____

Parent/Guardian (PRINTED) name: _____

Make checks payable to: **WBW**

Mail entry form and fees to: **WBW, P.O. Box 185, West Branch, IA 52358**