

# ROCK PORT YOUTH WRESTLING TOURNAMENT



**DATE: Saturday, February 23, 2019 @ Rock Port High School, 600 S. Nebraska St. Rock Port, MO**

**ENTRY FEE:** \$20.00 Pre-registered. Mail or E-mail **PREFERRED**. \$25.00 for walk ins. \*Limit to first 250 entries\*

Make checks payable to: ROCK PORT YOUTH WRESTLING **POSTMARK BY FEBURARY 20, 2019**

**MAIL TO:** Nichole Wallace (Club secretary)

**E-Mail:** [rpyouthwrestling@gmail.com](mailto:rpyouthwrestling@gmail.com)

705 South Main Street

**\*\*Look for us on Facebook\*\***

Rock Port, MO 64482

**\*\*Email registrations after 2/20/19 will pay walk-in fee\*\***

660-253-4444 (questions only, no call-in registration)

**FORMAT:** 4-Man Round Robin, when possible. Medals for all places.

<u>GRADE DIVISION</u>	<u>WEIGH INS</u>	<u>START TIMES</u>
K-UNDER	7AM-8AM	9:00AM
1 <sup>ST</sup> & 2 <sup>ND</sup> GRADE	CLOSE @ 8:30AM	10:00AM
3 <sup>RD</sup> & 4 <sup>TH</sup> GRADE	CLOSE @ 9:00AM	11:00AM
5 <sup>TH</sup> & 6 <sup>TH</sup> GRADE	CLOSE @ 10:00 AM	12:00 PM

**NOTE:** WRESTLERS NOT WEIGHED IN ON TIME WILL NOT BE BRACKETED.

**\*ALL WRESTLING TIMES WILL MOVE UP WHEN POSSIBLE\***

**ADMISSION: ADULTS \$3.00 STUDENT/CHILDREN \$2.00**

**CONCESSIONS:** Concession stand provided by Rock Port Youth Wrestling Club **\*\*NO COOLERS\*\***

**\*\*\*\*\*CUT & RETURN BOTTOM PORTION (Print Legibly)\*\*\*\*\***

Wrestlers Name: \_\_\_\_\_ Grade: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Club Affiliation: \_\_\_\_\_

Weight: \_\_\_\_\_ 2018/2019 Record: \_\_\_\_\_ Years Wrestled: \_\_\_\_\_

I certify that \_\_\_\_\_ was born on the date stated above & is in the \_\_\_\_\_ grade. I also certify that he/she has my permission to participate in the RPYW Tournament. I hereby accept full responsibility for his/her behavior & participation. I also accept full responsibility for my personal behavior as a parent / guardian. I will **NOT** hold the RPYW Club, the RP School system, or any of its agents responsible for any accidents occurring at this youth event.

**PARENT/GUARDIAN (Print & Sign):** \_\_\_\_\_ **DATE:** \_\_\_\_\_