

Melcher-Dallas Youth Wrestling Tournament

Sponsored by the Melcher-Dallas Athletic Booster Club

Sunday, January 10, 2021

2105 S. Main - Melcher, Iowa 50163

Divisions:

SuperPeeWee (PreK - 2nd grade) Weigh in 9:45 - 10:30, Wrestle at approx 11:15
PeeWee (3rd - 4th grade) Weigh in 11:30 - 12:15, Wrestle at approx 1:00
Junior (5th - 6th grade) Weigh in 11:30 - 12:15, Wrestle at approx 1:00

Format: 4-man round robin brackets. 3 one minute periods

Awards: Trophy for 1st Place, Medals for 2nd, 3rd and 4th.
Sportsmanship medals for outstanding sportsmanship

Cost: Wrestler Pre-registered and/or Call Inr \$15.00
Wrestler Walk-in Wrestler \$20.00
Spectator Wristband: \$5.00 (max. 2 per registered wrestler)

Walk-ins and Call-ins are welcome! (call or text Chris Metz 641-891-6105)

Send entry form and fee by **January 6, 2021** to: Chris Metz, 1868 61st Pl, Dallas, IA 50062

Make checks payable to MD Athletic Booster Club

If you need more information, please call or text Chris Metz at (641) 891-6105

****COVID 19 Precautions (subject to change at any time) ****

- Our primary goal of this event is to provide a fun and safe environment for youth wrestlers to gain experience
- Masks must be worn appropriately at all times while inside the Melcher-Dallas Community School facilities
- To support social distancing, spectators will be limited to two per wrestler. Spectator wristbands will be required to be worn during the event.
- Increased sanitation will be completed

~~~~~ Entry Form ~~~~~

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_ Division \_\_\_\_\_ Weight \_\_\_\_\_

City \_\_\_\_\_ Years Experience \_\_\_\_\_ This year's record \_\_\_\_\_  
Skill Level (Circle One) Beginner - Average - Excellent

Phone \_\_\_\_\_ School/Club \_\_\_\_\_

I certify that the entry above is in the stated grade, and has my permission to compete in the M-D Youth Wrestling Tournament. I hereby accept responsibility for his/her behavior and participation. I agree not to hold the M-D School District and/or the Melcher-Dallas Athletic Booster Club or its members, responsible for injury or accidents to my child or members of our party. I understand that neither is carrying medical insurance to cover my child.

Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_