

BOLT

HOSTED BY:

LIBERTY LIGHTNING WRESTLING CLUB



BRAWL

REGISTER TODAY!

**Liberty High School
1400 S. Dubuque St
North Liberty, IA 52317**

Sunday, January 27, 2019

Questions? Contact Joe Williams
(815) 978-7636 OR
joewilliams@libertyboltswrestling.com

BRACKETS: 3-4 Round Robin, each wrestler will have 2-3 matches

WEIGH-INS: Sunday, January 27, 2019 7:30am-8:30am. Wrestling will start at approximately 9:30am.

AWARDS: 1st Place — 4th Place receive medals, Champions receive brackets & t-shirts.

DIVISIONS: PreK - K, 1st - 2nd, 3rd - 4th Grade, 5th - 6th Grade and 7th - 8th Grade

ENTRY FEE: \$15 Pre-Register (Postmarked or paid online by January 25, 2019/ \$20 Walk-Ins

Mail Checks to :

**LIBERTY LIGHTNING WRESTLING CLUB
PO BOX 851
NORTH LIBERTY, IA 52317**

Or register online at: <https://libertylightningwrestling.com/events/2019-liberty-lightning-bolt-brawl/>

Cut and Mail- PLEASE PRINT LEGIBLY AND COMPLETE ALL INFORMATION:

I certify that (Athlete Name) _____

Street _____ City _____ State _____ Zip _____

Grade _____ Age _____ Weight _____ Birthdate _____ Record _____

Club _____ Years Wrestling _____ Email _____

Parent's Name: _____ Parent's Contact Number: _____

Parent's Name: _____ Parent's Contact Number: _____

The above stated athlete has my permission to compete in the Liberty Lightning Bolt Brawl Wrestling Tournament. I hereby accept full responsibility for his/her behavior & for his/her participation. I waive all claims for damages, loss or injury. I understand that Liberty High School or Liberty Lightning Wrestling club cannot be held responsible for lost items or liable for accidents. Any damage to property will be billed at the rate deemed appropriate by the school district. All wrestlers should have an AAU or USA card and are responsible for their own insurance.

Signature of Parent or Guardian: _____ Date: _____