

# WWC 8 Man Wrestling Tournament

Wapsie Valley High School  
2535 Viking Ave. (Rural) Fairbank, IA  
Date: January 13th, 2019 (Sunday)

**DIVISIONS:** Super Pee Wee      Pee Wee      Midget      Junior      Senior  
Pre K-K      Grades 1- 2      Grades 3-4      Grades 5-6      Grades 7-8

**FORMAT:** 8 Man brackets will be used wherever possible  
Everyone will wrestle no more than 3 matches.  
If tied after regulation IHSAA Rules will be used

**ENTRY FEE:** Pre-registration and Call-ins: \$15  
Make checks payable to: **Wapsie Valley Mat Pac**  
**NO WALK INS, NO REFUNDS**

**DEADLINE:** **Must be called in by Friday, January 11<sup>th</sup> at 10pm**  
**Mail Ins must be postmarked no later than Tuesday, January 8<sup>th</sup>**

**WEIGH-IN:** 10:30-11:30 A.M.      Wrestling starts at NOON

**Wrestlers must weigh within 3lbs of registered weight or a re-bracketing fee of \$10 will be applied**

**FORMAT AND AWARDS:** Champion receives a plaque, Medals for all places 2<sup>nd</sup> thru 8th.

**TEAM COMPETITION:** Wrestlers MUST register under the same school/club.  
Trophy's available for 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> place teams.  
Please register the day of the tournament.

**Mail completed form and entry fee to:**

WWC  
PO Box 302  
Fairbank, IA 50629  
319-784-7834

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Name: \_\_\_\_\_ Division: \_\_\_\_\_

Grade: \_\_\_\_\_ School/Club representing: \_\_\_\_\_ Weight: \_\_\_\_\_

2018-19 Record W \_\_\_\_\_ L \_\_\_\_\_ 2017-18 State Qualifier \_\_\_\_\_ 2017-18 State Place Winner \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

I certify that \_\_\_\_\_ was born on the date listed and is in the grade stated, and has my permission to compete in the WWC Tournament. I hereby accept full responsibility for his/her behavior and participation. I release the Wapsie Valley School District and all other agencies and individuals assisting in conducting the wrestling tournament from all liability and responsibility for any accidents involving or injuries sustained by my child.

Parent/Guardian signature: \* \_\_\_\_\_ Date: \_\_\_\_\_