

WESTERN DUBUQUE LITTLE BOBCAT

Wrestling Tournament

(Last year we had 320 wrestlers done wrestling in under 3.5 hours)



- DATE:** Sunday, December 15th 2019
- LOCATION:** Western Dubuque High School - 302 5th Ave. SW, Epworth, IA 52045
- WEIGH-IN:** 8:00am – 9:00 am (Wrestling starts at 10:00 am or when brackets are complete)
- CLINIC:** 9:00am – 9:45am (Advanced and Fundamental Technique clinic before wrestling begins)
- DIVISIONS:** Pre-K & K 1st & 2nd 3rd & 4th 5th & 6th 7th & 8th (2-1-1 periods)
* *There will be a division for girls and it will be bracketed as numbers / weights allow*
- FORMAT:** 4-person round robin format when possible (1-1-1 periods)
Pre-K – 6th wrestle on ½ mats 7th – 8th wrestle on full mats
Pre-K & K no match score will be kept. Advanced K may move up if desired
- AWARDS:** Pre-K & K → Trophies 1st - 8th → 1st Medal & Stocking Hats 2nd - 4th Medal
- TEAMS:** 10 member maximum from the same club. Pre-K & K are not eligible
- CONCESSIONS:** Breakfast & Lunch served (No coolers allowed)
- ADMISSION:** \$5 Adults \$3 Students
- INFORMATION:** For additional Information please feel free to contact WD youth coaches
Dan Gotto (563) 590-9768 or Aaron Burds at aaronburds@gmail.com
- REGISTRATION:** \$15 in advanced (Postmarked before December 12th) or \$20 at the door

Make checks payable to: Western Dubuque Wrestling

Mail entry form and fee to: Attention: Dan Gotto 15265 Briarwood Drive, Peosta, IA 52068

----- (Mail form below and entry fee) -----

Name _____ Age _____ Date of Birth _____ Grade _____

Address _____ City _____ State _____ Zip _____

Division _____ Record _____ School/Club _____

I certify that the above information is correct and the entrant has my permission to compete in the Western Dubuque Little Bobcat wrestling tournament. I hereby accept full responsibility for his/her behavior and participation. I release the Western Dubuque Booster Club, Western Dubuque Community School and individuals assisting in conducting tournament from all liability and responsibility for accidents or injuries to my child, myself or companions during course of tournament (including arrival and departure).

Parent / Guardian _____ Phone _____ Email _____