

Nutmeg Folk Style Wrestling Championship Series

SUNDAY October 7, 2007

Divisions: Elementary, Middle School, High School and Open Wrestlers

OUT OF STATE WRESTLERS WELCOME

Place : Shelton Intermediate School

675 Constitution Blvd N

Shelton, CT 06484

PRE REGISTRATION ENCOURAGED at \$17.00..... WALK-INS WELCOME for \$22.00!!

Madison weights will be used for Elementary and Middle School age groups. Weigh-ins October 7th, 2007 from 7:45 am to 9 am (except for Open wrestlers registration from 9:00 to 11:30, Open weigh-in's from 9:30 to 11:30). Wrestling will start at or around 10:00am for Kids through Juniors; Open wrestlers will start wrestling about 12:00. IF WRESTLER MISSES PRE-REGISTERED WEIGHT, they will be entered in the tournament under the weight they make at weigh-ins. During weigh-ins, all competitors will be inspected for skin rashes. Wrestlers with skin rashes will not be allowed to compete unless they have a current doctor's excuse saying they are under treatment, are not contagious as of a specified date and are cleared to wrestle. Tournament officials reserve the right to refuse entry to questionable cases. NFHS rules apply, Elementary bout times will be 1, 1.5, 1.5, Middle School bout times will be 1, 1.5, 1.5. High School and open will be bout times will be 1, 2, 2. Seeding will be based upon record or placement at State Class(section), State Championship(All States), and New England Placing. Top four seeded for bracket of eight, Top two seeded for brackets with six or less. Tournament is double elimination from the quarter finals forward. # 1 seed get first bye, # 2 gets second bye, etc.

Medals for the top three finishers in each weight class.

Points earned in Nutmeg Series MVW Award, see USAWCT web site for details USAWCT.org

A 2007-2008 USA Wrestling card **MUST** be shown at registration. If you don't have a card, enclose an additional \$35 with your registration and the USAW card will await you at the pre registration desk (NOTE: if wrestler is under 18 years old, their parent **MUST** sign the registration form (see USAWCT.org web site for 2007-2008 Membership Application to Pre- Register for a USAW card, which should be mailed with tournament registration form).

A USAW Card can be purchased at the tournament site.

- Admission for Spectators: \$3 for adults, \$1 for students
- Emergency Medical Personnel will be on-site.
- \$17.00 entry fee for pre-registered athletes, \$22.00 at the door
- Make checks out to **Derby Wrestling Club** *****Under 18 must have a parent sign the registration form.****
- For Information: Sarah Jadach email sjadach23@aol.com or call 203-231-3285
- Free admission for Coaches with 2007-2008 USAW Coaches' Card
- Breakfast, lunch and snacks available on-site
- Wrestling equipment will be available for purchase

To Pre register: •

2007-2008 USA Wrestling Card Required

Complete entry form, enclose check payable to **Derby Wrestling Club** for \$17.00 and **(if under 18)**

HAVE IT SIGNED BY A PARENT

- **Mail to Derby Wrestling Club c/o Sarah Jadach 20 Lakeview Terr. Derby, CT 06418.** by October 3rd with a check or money order payable to **Derby Wrestling Club.**

USAWCT Sanctioned clubs may register on line, weight must be entered, pre-registration ON LINE will close on October 3rd, 2007,

- No refunds of pre registration fee except for injuries. Written documentation required.

Elementary Division: Born 1997, 1998, 1999, 2000, 2001, 2002 & 2003 and Middle School Division: Born 1994, 1995 & 1996, weigh classes will be

Determined by the Madison System (grouping wrestlers in brackets of eight, by similar weight).

High School Division: Born 1993,1992,1991, 1990, 1989 if registered in a Public High School in the Fall of 2007

Open Division: Born 1989 or prior, unless you are born in 1989 and are registered in a Public High School in the Fall of 2007 (Post Graduate Students are welcome in the Open Division)

***Birth Certificate must be available upon challenge by tournament Director or other athlete
Challenging athlete must also present birth Certificate in order to challenge another's age
Failure to produce Birth Certificate will result in forfeiture of awards.***

The specific weight Classes for High School and open are: (No weight Allowances)

High School Division Weights: 84, 91, 98, 105, 112, 119, 125, 130, 135, 140, 145, 152, 160, 171, 189, 215, 285

Open Weights: 125,133,141,149,154,165,174,184,197,230 & 285 Tournament Director reserves the right to use Madison Weights if necessary

Application for Tournament
Assumption of Risk, Waiver and Release of Liability

NAME..... DATE OF BIRTH

STREET..... CITY..... STATE.....ZIP.....

TELEPHONE.....

2007-2008 USAW CARD #.....Club Name(for separation).....

Waiver and Release from Liability

1. I, _____ the undersigned, on behalf of myself, my heirs, and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliate clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of USA Wrestling and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors, and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USAW wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releasor understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision, or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releasor acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and other losses to person or property, including death, and that severe social and economic losses may also result not only from Releasor's own actions, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Furthermore Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

.....
(Participant's Signature)

.....
(Print Name)

.....
DATE

The undersigned _____ does hereby represent that he/she is, in fact, the parent or guardian of _____ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

.....
(Signature of Parent or Legal Guardian)

.....
(Print Name)

.....
DATE (Relationship to Minor)