

The Fall Brawl 2010

SUNDAY October 31, 2010

Bristol Eastern High School, 632 King Street, Bristol, CT 06010
OUT OF STATE WRESTLERS WELCOME, Must pay with CASH

PRE REGISTRATION ENCOURAGED at \$20.00..... WALK-INS WELCOME for \$25.00!!

HARRASMENT OF OFFICIALS WILL NOT BE TOLERATED!!!!

Two coaches in a corner, all questions on an official's call SHALL BE DONE AT THE SCORING TABLE, FAILURE TO FOLLOW THIS RULE WILL RESULT IN AUTOMATIC WARNING TO THE COACH ONE MATCH POINT will be given to the OPPONENT OF THE OFFENDING COACHES' WRESTLER FOR THE FIRST INCIDENT AND THE SECOND INCIDENT RESULTS IN THE COACHES EJECTION FROM THE FACILITY.

Madison weights will be used for Elementary, Middle School age groups and Opens. 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 contagious skin conditions. Wrestlers with contagious skin conditions will not be allowed to compete unless they have a current doctor's excuse saying they are under treatment and the exact location of the contagious skin condition, that they 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 & 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.

A 2010-2011 USA Wrestling card **MUST** be shown at registration. If you don't have a card, enclose an additional \$36 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 2010-2011 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 for \$36.00.

Admission for Spectators: \$3 for adults, \$1 for students • Free admission for Coaches with 2010-2011 USAW Coaches' Card • Emergency Medical Personnel will be on-site. • Breakfast, lunch and snacks available on-site • \$20.00 entry fee for pre-registered athletes, \$25.00 at the door • Wrestling equipment will be available for purchase • Make checks out to **Chad Cormier**
*****Under 18 must have a parent sign the registration form.****

For Information: Bryant Lishness 860.402.0346 email jlish11@snet.net

2010-2011 USA Wrestling Card Required

Complete entry form, enclose check payable to **Chad Cormier** for \$20.00 and (if under 18) HAVE IT SIGNED BY A PARENT • **Mail to Chad Cormier** 25 Mark Street, Bristol, CT 06010, Oct 28th with a check or money order payable to **Chad Cormier**. • No refunds of pre registration fee except for injuries. Written documentation required.

Weigh-ins October 31, 2010 from 7:45 am to 8:45 am for Elementary & Middle School (matches begin 10:00 am) Elementary Division: Born 2001, 2002, 2003, 2004 and Middle School Division: Born 1997, 1998, 1999 & 2000, weigh classes will be determined by the Madison System (grouping wrestlers in brackets of four, by similar weight, to be wrestled in a round robin format 3 matches for each wrestler, when possible).

Weigh-ins October 31, 2010 from 9:00 am to 10:00 am for High School (matches begin 11:00 am) High School Division: Born 1996,1995,1994, 1993, 1992 if registered in a Public High School in the Fall of 2010, weigh classes will be line bracket round of 32, 16, 8 or round robin if five or less.

Weigh-ins October 31, 2010 from 10:00 am to 11:30 am for Open division (matches begin 12:30) Open Division: Born 1992 or prior, unless you are born in 1992 and are registered in a Public High School in the Fall of 2010 (Post Graduate Students are welcome in the Open Division) weigh classes will be determined by the Madison System (grouping wrestlers in brackets of four, by similar weight, to be wrestled in a round robin format 3 matches for each wrestler, when possible).

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

High School Weights: 98, 105, 112, 116, 119, 125, 130, 133, 135, 140, 145, 148, 152, 157,160, 171, 189, 215, 285 Open Weights: Madison System (grouping wrestlers in brackets of four, by similar weight, to be wrestled in a round robin format 3 matches for each wrestler, when possible).

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

NAME..... DATE OF BIRTH
STREET..... CITY..... STATE.....
TELEPHONE.....
2010-2011 USAW CARD #..... Club Name.....

Waiver and Release from Liability

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)