

MEMORIAL WEEKEND FOLKSTYLE WRESTLING TOURNEY

**SUNDAY, May 28, 2017 (4 man Round Robin)
Bristol Eastern High School, 632 King Street, Bristol, CT 06010**

Entry Fee: \$30.00 walk-in or \$25.00 pre-registration online through USAWCT.org with a sanctioned club or by mail Attention: Bryant Lishness, BEHS, 632 King Street, Bristol, CT 06010, *must be received by 05/26/17 or you will have to pay the walk-in rate.*

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

Weigh-ins & Skin Check: Elementary and MS - 7:30 am to 8:30 am w/ a start time of 9:15.
High School and Open – 9:30am to 10:30am w/ start time of 11:15.

<p>Format: Madison weights - 4 man Round Robin Elementary and Middle School bout times will be 1:15, 1:15, 1:15. High School and open will be bout times will be 1:30, 1:30, 1:30.</p>

Medals for the top three finishers in each weight class.

A 2016-2017 USA Wrestling card **MUST** be shown at registration. USA Cards will be for sale at this tournament for \$36 for child competitors. Open competitors can purchase their cards online through USA Wrestling. (NOTE: if wrestler is under 18 years old, their parent **MUST** sign the registration form (see USAWCT.org web site for 2016-2017 Membership Application to Pre-Register for a USAW card.)

- Admission for Spectators: \$3 for adults, \$1 for students
- Free admission for Coaches with current USA Wrestling Coaches' Card
- Emergency Medical Personnel will be on-site.
- Concession will be open all day.
- Make checks out to Bristol Eastern Wrestling
- ******Under 18 must have a parent sign the registration form.******
- For Information: Bryant Lishness at 860.402.0346 or email jlish11@snet.net

Elementary: Born 2007, 2008 2009, 2010, & 2011

Middle School Division: Born 2003, 2004, 2005 & 2006.

High School Division: Born prior to 2002 and registered in a Public High School in the fall of 2016

Open Division: Born 1998 or prior

Birth Certificate must be available upon challenge by tournament Director and the 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.

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

NAME..... DATE OF BIRTH
STREET.....CITY..... STATE.....
TELEPHONE.....
2016-2017 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.

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(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.

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(Signature of Parent or Legal Guardian) (Print Name / Relationship) DATE