



Falcon Mat Club Elementary Wrestling Tournament

Saturday, March 3, 2001

LOCATION: **Cedar Crest High School**
115 E. Evergreen Road, Lebanon, PA

WEIGH INS

ON SITE: Friday March 2, 2001 - 6:00 – 8:00 PM at Cedar Crest H.S. Gym area
OFF SITE: Thursday, March 1, 2001 - Pre-Registration and weigh ins by special arrangement through local Mat Clubs. Contact Tournament Director for details

Wrestling Begins at 9:00 AM to completion

Age Division and Weight Classes as Follows:

PEEWEE	6 & Under	35,	40,	45,	50,	55							
BANTAM	8 & Under	45,	50,	55,	60,	65	70,	80,		Hwt. (Max 110)			
MIDGET	9 & 10	50,	55,	60,	65	70,	75,	80,	85,	90,	100,		Hwt. (Max 130)
JUNIOR	11 & 12	60,	65	70,	75,	80,	85,	90,	95,	100,			Hwt. (Max 175)

Entry Fee : **\$12.00** (Non-refundable) Payable to **“FALCON MAT CLUB”**

Mail To:	Dan Sidelnick Tournament Director 42 Eastfield Dr. Lebanon, PA 17042	Alternative Contact :	Dan Stoddard, Coordinator Cedar Crest M.S. (717) 272-2032 - school (717) 279-6882 - home
	Phone: (717) 272-4883		
	FAX: (717) 306-4346		
	email dsidelnick@nbn.net		

AWARDS: Trophies for 1st, 2nd, 3rd, 4th places in each weight class
BOUT TIMES: 1 – 1 – 1 Sudden Death Overtime
ADMISSION : \$3.00 ADULTS/\$1.00 CHILDREN

(DETACH AND RETURN with \$12.00 ENTRY FEE)

NAME: _____ Date of Birth _____ Age _____

Address: _____ Phone: _____

CLUB/TEAM _____ (effort will be made to separate wrestlers on same teams)

Age Division : _____ Weight Class _____ Win/Loss Record _____
(2000-2001)

I hereby give this child permission to wrestle in the Falcon Mat Club Wrestling Tournament and release all sponsoring bodies, their officers, tournament officials, committees and other parties affiliated with the tournament from all liability.

PARENT SIGNATURE _____ DATE _____

WRESTLERS SIGNATURE _____