JANUARY 19th 2013
DAVID CITY WRESTLING CLUB TOURNAMENT
DAVID CITY HIGH SCHOOL ACTIVITIES CENTER
7TH & "D" STREET
CONTACT: TAHNER THIEM
WORK: (402)367-3187 **AFTER 3:30PM**
OR ON THE WEB SITE: **davidcitywrestling.com**

AGE DIVISION	**WEIGH – IN**	**WRESTLE AT**
Preschool and Kindergarten **(NO WALK-INS)**	Check in 7:00am to 8:00am	9:00am
1st and 2nd Grade **(NO WALK-INS)**	Check in 7:00am to 8:00am	approx. 10:30am
3rd and 4th Grade	7:00am to 11:00am	after 1st and 2nd Grade
5th and 6th Grade	7:00am to 12:00 noon	after 3rd and 4th Grade
7th and 8th Grade	7:00am to 1:00pm	after 5th and 6th Grade

ALL 4-MAN ROUND ROBINS – WHERE POSSIBLE
LIMITED TO THE FIRST 500 WRESTLERS

ENTRY FEE: $13.00 due with entry form by Thursday, January 17th, 2013
You may enter on line by 5:00PM, Friday, January 18th, 2013
Walk-ins welcome (3rd thru 8th Grade only): $15.00 at the door.
Make checks payable to: **DAVID CITY WRESTLING CLUB**

ADDMISSIONS: Adults: $4.00 Students & children: $2.00

IN CASE OF BAD WEATHER: Listen to **KLIR (CLEAR) FM 101** or check our web site **davidcitywrestling.com**
Weather Date: Sunday, January 20th, 2013

AWARDS: **TROPHIES** FOR 1ST place winners, **MEDALS** for 2nd through 4th place winners.
CLUB WITH THE MOST WRESTLERS RECEIVES $100.00

SCORING: No team scores will be kept. Three one minute periods for Pre-6th Grade (sudden death)
Three - 1 ½ periods for 7th and 8th Grade (sudden death). Registered and Youth officials.

PAIRINGS: Will be done after weigh-ins close of each age division. All 4-man round robins where possible.
Preschool thru 2nd Grade will be bracketed the night before.

STARTING TIME: Each age division will need to report to their assigned mat and needs to stay there until their Bracket has been **fully completed**. You will be **PAGED only once** and then you will be **DQ'ED**; unless you're wrestling on another mat.

CONCESSIONS: **BREAKFAST ITEMS**, food and drinks will be available **ALL DAY.**

PLEASE PRINT CLEARLY **MAKE CHECKS PAYABLE TO: DAVID CITY WRESTLING CLUB**

WRESTLER'S NAME_____GRADE_____**WEIGHT**_____
ADDRESS_____PHONE #_____
_____CLUB NAME_____
PARENTS NAME_____COACHE'S NAME_____

LIABILITY WAIVER: In consideration of you accepting this entry. I hereby for myself, my heirs, executors, and administrators waive and release the David City Wrestling Club and/or all their coaches, team members, David City Public School, sponsors, and agents from any and all claims of rights for injury, damages or losses suffered at the 2013 David City Wrestling Tournament.

WRESTLERS SIGNITURE_____
PARENTS/GUARDIAN SIGNITURE_____ **ENTRY FEE: $13.00**

Make checks payable to **DAVID CITY WRESTLING CLUB** and send **ALL** entries to **TAHNER THIEM** at David City Public High School, 750 "D" Street, David City NE 68632. For more forms or to register, click onto **davidcitywrestling.com.**