



FREMONT WRESTLING CLUB TOURNAMENT

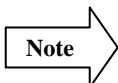
SUNDAY, FEBRUARY 15, 2009

NEW: Midland Lutheran College 900 North Clarkson St



APPROXIMATE SCHEDULE

<u>Division</u>	<u>Weigh-in</u>	<u>Wrestle</u>
Pre K & K	6:30 to 7:30 AM	9:00 AM
1 st & 2 nd	Closes at 9:30 AM	Follows Pre K & K
3 rd & 4 th	Closes at 11:30 AM	Follows 1 st & 2 nd
5 th & 6 th	Closes at 1:00 PM	Follows 3 rd & 4 th
7 th & 8 th	Closes at 2:00 PM	Follows 5 th & 6 th



WEIGH-IN: SATURDAY FEBRUARY 14 FROM 6-8:00 P.M. OR SUNDAY MORNING at the college.

ENTRY FEE: \$13.00 (NO WALK INS and NO REFUNDS)

DEADLINE: All entries must be postmarked by Thursday Feb. 12, 2009

ADMISSIONS: Adults \$3.00, Children \$1.00, Senior Citizens \$1.00

BRACKETING: Will be using Auto Bracket and bracketing will be done by Tom Saywer, the designer of Auto Bracket system.

FORMAT: PreK - 2nd 4man round robins

3rd - 8th will be 8 man brackets when possible

PreK - 6th will be 1 min periods. Huskerland rules apply

7th - 8th will be 1 1/2 min periods. Will have choice.

AWARDS: Custom medals will be awarded to top 4 placers. Wall bracket to the champions. Team Plaques awarded to top 2 teams of A and B divisions.

Divisions will be decided day of tournament based on # of entries per team.

MAIL ENTRIES: Fremont Wrestling Club

P.O. Box 52

Fremont, NE 68026-0052

MAKE CHECK PAYABLE TO: Fremont Wrestling Club

TEAMS: Teams can be entered individually but need to be marked as paid by team check.

CONTACT INFORMATION:

Chris Holt (402) 753-8256

Sean Edie (402) 720-1508

Fax: (402) 753-8256 (Call First)

(ALL INFORMATION IS REQUIRED TO ACCURATELY BRACKET WRESTLERS.)

Name _____ Birthdate _____ Age _____ Grade _____

Address _____ City _____ State _____ Zip _____

Phone _____ Club _____ Weight _____

Wrestling Experience _____ years Record: Wins _____ Losses _____ USA card # _____

Please indicate: Team Pay _____ Individual Pay _____

LIABILITY WAIVER: In consideration of your accepting this entry, I hereby for myself and administrators, waive and release any and all injuries suffered by me, at or in connection with, the 2009 Fremont Wrestling Club Tournament, Fremont Wrestling Club Inc, Midland Lutheran College.

Signature of Parent/Guardian _____ Date _____