

Arlington Wrestling Club's 4th Annual Trophy Tournament Saturday, March 7th, 2009

WHERE: Arlington High School, 705 9th Street, Arlington, Nebraska 68002

ENTRY FEE: \$12.00 per wrestler- NO REFUNDS, Due by March 2nd, 2009
Make checks payable to Arlington Youth Wrestling Club.

FORMAT: Four-Man round robin, will wrestle 3 times when possible
Trophies for all participants, 1s t- 4th place. Limited to 300 wrestlers.

BRACKETING: Done after each groups weigh-ins. Divisions may begin wrestling
earlier than posted time, if prior group is finished.

OFFICIALS: High School Varsity wrestlers supervised by certified officials.

ADMISSION: Adults \$3.00, Students \$1.00, Under 5 Free

CONCESSIONS WILL BE AVAILABLE ALL DAY

DIVISION	WEIGH-IN	WRESTLE TIME
Junior Ages 11 & 12	7:00am-8:00am	9:00AM
Mini Pee-Wees ages 6 & under	7:00am-9:00am	10:30AM
Pee-Wees Ages 7 & 8	7:00am-11:30am	12:30PM
Intermediate Ages 9 & 10	7:00am-1:00pm	2:00PM

Walk-ins welcome provided there is room on the bracket

For more information e-mail or call:

Greg or Cathi Sampson cathiandgreg@huntel.net 402-478-5742
 Heath Penny hpennycrna2b@hotmail.com 402-478-4103
 Web site www.arlingtonyouthsports.org

***For notice of cancellations due to weather call: 402-478-4911**

Mail all entries to: Greg Sampson, 1425 Walnut Drive, Arlington, NE 68002

Wrestler _____ Grade _____ Age _____

Club _____ Weight _____

Parents _____ Phone _____

Liability waiver: In consideration of your accepting this entry, I hereby for myself, my heirs, my executors and administrators, waive and release the Arlington Wrestling Club, Arlington Public Schools, and all their agents from any injuries suffered by me or my family in conjunction with the 2007 Arlington wrestling club tournament.

Parent or Guardian _____ Date _____

(Signature)