

The 19th Annual Tyler Lynde Wrestling Tournament

PLEASE NOTE:REVISED CHECK IN & START TIME



Saturday March 13th, 2010

Hauppauge High School, 500 Lincoln Blvd (Main Gym)

Youth Wrestling Starts 10:00 AM (check in 9:15AM)

MS Wrestling Starts 12:30 AM (check in 11:30 AM)

Age Divisions - 5 & 6 yrs., 7 & 8 yrs., 9 & 10 yrs., 11 & 12 yrs., 7th & 8th Grade

Youth Weight Classes - 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, 130, 140, 150, 160, Hwt.

7th & 8th Grade Weight Classes - 75, 80, 85, 90, 95, 100, 110, 120, 130, 140, 150, 160, 170, Hwt.

(Wrestlers in 7th & 8th grade must wrestle in this division regardless of age)

(Weight classes will be divided or combined to fill eight man brackets.)

N.Y.S. High School Rules ~ Length of bouts: 1-1-1minute

***NO 15 YR. OLDS, NINTH GRADERS, VARSITY OR JV EXPERIENCE**

Individual Registration and Weigh-Ins Wed., March 10th (Hauppauge HS Wrestling Room 6pm-8pm)

***Weigh-Ins Required For all wrestlers not called in by their coaches (No exceptions)**

***No walk-in entries, weigh-ins or USA Cards sold on Saturday**

All Coaches must Email or Call In Roster and Weights

by Thurs. March 11th, 2010, (before 8:00pm)

(A scale will be available at mat side if honor weigh-ins are questioned)

“Wrestlers with any form of Skin Condition or Rash will not be permitted to wrestle”

Entree Fee: \$20.00 payable to the Hauppauge Wrestling Club

All proceeds go to the Hauppauge Wrestling club, (Tyler Lynde Scholarship Fund).

Awards: Medals for 1st, 2nd, 3rd, and 4th place finishers in each weight class

Uniform: singlets, gym shorts, T-shirts, sneakers or wrestling shoes. No sweatpants.

All wrestlers, if possible will get at least two matches. **NO MAT SIDE COACHING**

***Entrees will be limited to the first 300 participants and must be received by Thurs., March 11, 2010**

Mail Applications to: Coach Charlie Clackett ~ 47 Serene Place, Hauppauge, NY 11788

Email: cudavision@aol.com Phone: 631-724-9162

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Registration: Detach on dotted lines, Registration form must be received by Thurs. March 11th, 2010

I hereby give my child, _____ permission to participate and compete in the Tyler Lynde Wrestling Tournament. I assume full responsibility and liability for any and all injuries my child may sustain during the course of the event. I will not hold the Hauppauge School District or any individual working at the tournament responsible for any situations or injuries that may arise. I understand that in the event of an accident or injury, only emergency medical care will be provided and I authorize the rendering of such medical care be provided as may be required.

PLEASE PRINT CLEARLY AND GIVE CORRECT AGE, GRADE AND WEIGHT.

Name _____ School/Club _____

Address _____ Town _____ USA CARD # _____ (required)

Phone _____ Date of Birth _____

Age _____ Grade _____ Wt. Class _____ Experience (Circle one) Good/ Novice/ Beginner

Wrestlers Sign. _____ Parents Sign. _____

***APPLICATION MUST BE SIGNED BY PARENT**