

West Islip Youth Wrestling Takedown Tournament

Friday, December 29th 2017

LOCATION: West Islip High School 1 Lions Path, West Islip, NY 11795

TIME: Grades 2-3-4-5 Check-In 2:00-2:30pm and weight confirmation **Wrestling Begins 3:00pm**

Grades 6-7-8 Check-In 3:30-4:00pm and weight confirmation **Wrestling Begins 4:30pm**

Grades 2-3-4-5 Takedown Tournament- One 3 minute period. All wrestlers guaranteed three matches.

Grades 6-7-8 Takedown Tournament- One 3 minute period. All wrestlers guaranteed three matches.

All Pools will be based Wrestlers grouped by weight age and ability.

REGISTRATION & FEES: \$35 per wrestler.

Register Online at wellruntournaments.com

All entries must be received by Wednesday, December 27th at midnight

NO LATE ENTRIES & NO WALK-INS WILL BE ACCEPTED

Contact Tom Longobardi at(516)220-6589 or email t.longobardi@wi.k12.ny.us

CURRENT USA CARD REQUIRED TO COMPETE: Number must be given on registration OR presented at weigh-ins

Tournament Committee reserves the right to modify &/or adjust weight classes and Divisions to promote wrestling.

AWARDS: EVERYONE RECEIVES A MEDAL

RULES: NYS High Scholastic Rules. Headgear and singlets recommended but not required.

FOOD: Concession stand will be open during the tournament. No food is allowed in the gym.

FURTHER INFORMATION: Coaches, please call Tom Longobardi at(516)220-6589 or email t.longobardi@wi.k12.ny.us

Entries must come through a coach who will verify weights and ability level.

This tournament is not affiliated with the West Islip School District

PLEASE PRINT: Wrestler's Name: _____ Date of Birth: _____

Club Name: _____ Age/Grade: _____/_____

Telephone #: _____ Weight: _____ USA Card #: _____

Coaches (please circle): **Beginner/Novice Group A** **Advanced Group B**

Coach's Name: _____

Participant's Waiver and Release from Liability

1. I, _____, the undersigned, on behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasers") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliated clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past present or future, direct or consequential that I may hereinafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releaser understands and acknowledges that USA Wrestling activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling s sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releaser acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releaser, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from Releaser's own actions, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Further Releaser acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time. I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

The undersigned, _____ does hereby represent that he/she is, in fact, the parent or legal guardian of

_____ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

(Signature of parent or legal guardian)

(Date)

(Print Name)

(Relationship to minor)