33rd Annual Beatrice Wrestling Club
2017 Invitational Tournament

DATE: January 29th, 2017 (Sunday)
(Snow Out Date – February 5th (Sunday)

TOURNAMENT SITE: Beatrice High School
(East Side of town on Hwy. 136)

ENTRY FEE:

$18.00 per wrestler online (**recommended and pay at the door**), $18.00 mail-in or $20.00 for walk-ins/call-ins.
No walk-ins or call-ins after January 28th for divisions A & B

ENTRY DEADLINE:

January 26th, 2017 if mailing entry in.
January 28th, 2017 if registering online @ www.beatricewrestlingclub.net (follow link on main page to register.)

DIVISIONS:

*** Wrestling Times Are Subject To Advancement, If Permitted***			
DIVISION	**AGES**	**REGISTRATION**	**WRESTLE TIME**
A	6 & UNDER	7:00 AM - 8:00 AM	9:00 AM
B	8 & UNDER	7:00 AM - 8:00 AM	9:00 AM
C	10 & UNDER	BY 10:00 AM	12:00 PM
D	12 & UNDER	BY 12:00 PM	2:00 PM
E	14 & UNDER	BY 2:00 PM	4:00 PM

AWARDS:

DIVISIONS A & B	**Trophy** for **1st** and medals for 2nd, 3rd & 4th place
DIVISIONS C, D & E	**Trophy** for **1st** and medals for 2nd, 3rd & 4th place **T-shirt** for **Champ of Champs**

BRACKETS:

DIVISIONS A & B	4-man round robin and 2-man best 2 out of 3.
DIVISIONS C, D & E	4-man round robin with a Champ of Champs match with consecutive paired brackets

SCORING:

Certified referees
Huskerland Modified Rules: **DIVISIONS A-D** (3) 1 minute periods
DIVISION E (3) 90 second periods

COACHES MEETING:

8:30 am **Note:** Three coaches per team will be admitted for free again this year.

ADMISSIONS:

Adults $5.00 Students $ 3.00 5 and under free

CONCESSIONS:

All day!!! Absolutely no coolers in the gym

REGISTRATION INFO:

We are using Auto Bracket. ***No late call-ins or walk-ins for divisions A & B.**
Please be on time! We will not hold the tournament for you!
For call-ins or registration information please call Brian York @ (402) 806-1958. Leave a message if no answer.

DAY OF TOURNAMENT:

Tournament director Tim Fralin: (402) 520-1379

INSURANCE:

AAU

Make checks payable: Beatrice Wrestling Club P.O. Box 949, Beatrice, NE 68310

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NAME_____ AGE_____ DOB_____

ADDRESS_____ WEIGHT_____

GRADE_____ FULL CLUB NAME_____ YEARS WRESTLED_____

WINS_____ LOSES_____

***RECORDS ARE MANDATORY IF THERE IS NO RECORD STATE WHY OR WE HAVE TO ASSUME YOUR WRESTLER IS THE BEST**

LIABILITY WAIVER:

In consideration of your accepting this entry, I hear by for myself, my heirs, my executors and administrator, waive and release Beatrice Wrestling Club Inc., and or all their agents, officers, coaches, representatives, and or team members and Beatrice School District #15, from any and all claims of rights to damage for injury losses suffered directly or indirectly in attendance or participation in the 2017 Beatrice Wrestling Club Tournament.

Parent/ Guardian Signature_____

BEATRICE WRESTLING CLUB 2017 INVITATIONAL TOURNAMENT