

2011 Crowfield Classic

HOSTED BY: **Crowfield Takedown Club**

DATE: **December 10th, 2011**

TOURNAMENT LOCATION: **Stratford High School
951 Crowfield Blvd.
Goose Creek, SC 29445**

SPECTATOR FEE: **\$5 & CHILDREN UNDER 2 FREE**

WEIGH INS: **Saturday Morning: @ 7 – 8:30 am**

COACHES' MEETING: **@ 8:40 am**

WRESTLING STARTS: **@ 9 am**

TOURNAMENT USING: **STANDARD SCYWA AGES & WEIGHTS**

MATCH TIME: DIV 1 thru DIV 3 - (3) 1 MINUTE PERIODS

DIV 4 and DIV 5 - (3) 1:30 MINUTE PERIODS

AWARDS: **Medals for 1st – 3rd**

REGISTRATION FEE: **\$13.00**

REGISTRATION CUTOFF: **11pm (Thursday) 12/08/2011**

REGISTRATION LIMIT: **None**

REGISTRATION AT: <http://www.carolinawrestling.com/>

This event is sanctioned by SCYWA (Team Palmetto Wrestling, Inc.). All participants must have a current SCYWA membership.

- **ALL WRESTLERS AND COACHES MUST HAVE CURRENT SCYWA CARDS.**
- **ALL WRESTLERS MUST COMPLETE THIS FORM AND BRING IT THE DAY OF THE TOURNAMENT.**
- **ALL WRESTLERS MUST HAVE TAPED LACES.**
- **HAIR LENGTH MUST COMPLY WITH NFHS RULE 4-2-1.**
- **MOUTH PROTECTION REQUIRED IF WRESTLERS HAVE BRACES OR ORTHODONTIC DEVICE ON TEETH.**

Ages & Divisions: (Based on age as of 12/31/2011)

(D1) 6 & Under	35,40,45,50,55,60,65,75,Hwt
(D2) 8 & Under	40,45,50,55,60,65,70,75,80,90,100,Hwt
(D3) 10 & Under	50,55,60,65,70,75,80,85,90,95,103,112,120,130,Hwt
(D4) 12 & Under	60,65,70,75,80,85,90,95,100,105,112,120,130,150,170,Hwt
(D5) 13, 14 & 15*	70,75,80,85,90,95,100,105,110,115,120,125,130,140,150,160,180,200,Hwt

*Must provide proof that wrestler is still in 8th grade. **Tournaments have the option to block Heavyweights to ensure matches; however there should be no more than a 20 pound spread between competitors in Division 1, no more than a 25 pound spread between competitors in Divisions 2 & 3 and a 30 pound spread between competitors in Divisions 4 & 5.

There is no weight allowance. **Weigh in uniform is singlet, no socks or shoes.** You will not be allowed to strip down to underclothes and you will not be allowed to leave the weigh in room to run. If you do not make weight you will be scratched. **There will be no refunds.**

TOURNAMENT DIRECTOR CONTACT INFO: Willie Nearhood, email willienearhood@berkeley.k12.sc.us

Team: _____

Name: Address: _____

City/State/Zip: _____

Phone: _____

Date of Birth: _____

SCYWA Number: _____

Division	Weight Class

In consideration of your acceptance to my entry, I and my legal heirs do hereby waive and release any and all claims for damages I may have against the hosting organization/club, their sponsors, coaches, volunteers, tournament officials, and/or administrators for any and all injuries suffered by me in connection with the tournament named above. I have reviewed the flyer for this tournament and agree to all rules, guidelines, and additional waiver information printed.

Parent Signature

Date