

**KANE JUNIOR WRESTLING TOURNAMENT  
PRE-REGISTRATION ONLY**

DATE: Saturday January 2<sup>nd</sup>, 2010  
**Registrations Must Be Received By 12-29-2009 – NO PHONE ENTIRES**

LOCATION: Kane Area High School Route 321 and Hemlock Ave. Kane, PA  
WEIGH INS: 7am – 9am (no weight allowance)  
START TIME: Coaches Meeting at 9:30am – Wrestling to begin as soon as possible after meeting  
ENTRY FEE: \$15.00 payable to Kane Wrestling Club (No Refunds - \$20 fee for returned checks)  
AGE: Age as of December 31<sup>st</sup>, 2009  
MAIL ENTRIES: Tim Blankenship  
10 North Tionesta Ave.  
Kane, PA 16735

RULES: Modified PIAA rules/double elimination tournament. We reserve the right to combine weight classes if fewer than 3 wrestlers in a class. All referees decisions are final. All bouts will be 1 – 1 – 1. Headgear is recommended.

AWARDS: Individual trophies for 1<sup>st</sup> thru 4<sup>th</sup> place – Team trophies for 1<sup>st</sup> thru 3<sup>rd</sup> place

<u>AGE GROUPS</u>	<u>WEIGHT CLASSES</u>
6 & Under	40, 45, 50, 55, 60, 65, HWT (max 80)
7 & 8	45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, HWT (max 120)
9 & 10	55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 110, 120, HWT (max 150)
11 & 12	65, 70, 75, 80, 85, 90, 95, 100, 105, 110, 115, 125, 140, 160, HWT (max 200)

ADMISSION: Adults \$3.00 Students: \$1.00

Cafeteria will be open all day including hot breakfast menu.  
PLEASE NO FOOD OR DRINKS IN THE GYM.  
ABSOLUTELY NO SHOES WITH WHEELS.

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PARTICIPANT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

WEIGHT CLASS: \_\_\_\_\_ AGE GROUP: \_\_\_\_\_ SCHOOL/CLUB: \_\_\_\_\_

PAST HONORS (please list): \_\_\_\_\_

\_\_\_\_\_

Please enter me in the above wrestling tournament. I hereby release the Kane Wrestling Club, officials of this tournament, and anyone connected with this tournament from any claim, liabilities, or rights of damage for any injuries or losses suffered by me in training for, traveling to and from, or participating in this Kane Junior Wrestling Tournament.

PARTICIPANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_