9th Annual Kyle Sorensen Memorial Wrestling Tournament @ Weeping Water

Saturday, February 24, 2018

**Location:** Weeping Water High School (204 West O Street, Weeping Water, NE)

**Entry Fee: $18.00** per wrestler Pre-Meet, $25 at the door

**Admission:** $3.00 for adults and $1.00 for students. Three coaches from each club will be allowed free admission (Coaches sign-in at the door.)

**Concessions:** Will be available all day.

**Age Divisions:** 6 & under, 8 & under, 10 & under, 12 & under, 14 & under (non High School)

**Schedule:** **Round Start times are tentative. If we can start rounds early we will move right into the next round.**

 9:00 –11:00 am 6 & under (weigh-in by 8:00 am )

11:0 0– 1:00 pm 8 & under (weigh-in by 10:00 am )

1:00– 3:00 pm 10 & under, 12 & under (weigh-in by 12:00 pm )

3:00 -5:00 pm 14 & under (weigh-in by 2:00 pm )

**Weigh-Ins:**All wrestlers are to weigh in at least one hour prior to the beginning of specified time.

**Format:** 4-man round pools (every effort will be made to separate teammates and make pools as competitive as possible).

**Checks Payable To:** Weeping Water Little League Wrestling Club

**Online Registration** -

**Or Mail Registration**  **Lawrence and Mary Mozena**

 **PO Box 318**

 **Weeping Water, Ne 68463**

**Entry Deadline:** Received by Friday, 2/23/17 (limited to the first 300 entries). Emails and call-ins are welcome on, or before designated deadline. **\*Walk-ins are welcome at an additional fee \***

**Contact Information:** Lawrence Mozena: Home Phone (267-7525) Mary cell(297-9842), email: mmozena@weepingwaterps.org

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_D.O.B.\_\_\_\_\_\_\_\_\_\_\_\_Age\_\_\_\_\_\_\_Approx.Wt\_\_\_\_\_\_

Current Grade\_\_\_\_\_\_\_\_\_\_\_\_\_ Record this season\_\_\_\_\_\_\_\_\_\_ Club\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTE: There will be no novice division, per se, but we will make every effort to ensure that the brackets are as even as possible. There are, however, no guarantees.

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, State\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Guardian\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Weeping Water Wrestling Club, Weeping Water Public Schools, nor anyone involved with this tournament will be liable for any injuries, accidents, or losses.**