

**East Pennsboro Elementary Novice Wrestling Tournament**  
**Sunday, January 8th, 2012**  
**2 Years or less Experience**

**No Refunds. No inclement Weather Date.**

Location: East Pennsboro High School, Gym 425 Shady Lane, Enola, PA 17025  
Starting Time: Wrestling begins at 9:30 AM for Divisions 1-2,  
Wrestling begins at 11:00 AM for Division 3&4  
Weigh-Ins: Honor System (no weigh ins). Scales will be available for challenges. Tournament Directors  
Decisions are final.

Divisions: (may combine weight classes if needed)

Division: **1. (6 and under)**

35, 40, 45, 50, 55, 60, UNL

Division: **2. (8 and under)**

45, 50, 55, 60, 65, 70, 75, 80, 85, 95, UNL (MAX 120)

Division: **3. (10 and under)**

50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, UNL (MAX 140)

Division: **4. (12 and under)**

60, 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, 130, UNL (MAX 170)

Madison Weight system will be used. We will have 4 man brackets, or 3 Man Round Robins. Everyone will have 2 matches.

Age: Participants age as of the day of tournament.

Rules: P.I.A.A. will be followed. Bout times (all) 1-1-1 (old OT rules 1 then 30 ride out)

Awards: All wrestlers will receive awards

Registration: Limited to first 450 entries received.

Entry Fee: \$15.00 **MUST** postmarked by 1/3/12 Call for Team Discounts- Andrew Mauer 717-802-6828

\*\*\*\*\* **NO WALK-Ins! PRE REGISTRATION ONLY! MUST BE RECEIVED BY 1/5/12\*\*\*\*\***

Mailing Info: Make Checks Payable to East Pennsboro Wrestling Association (EPWA)

Mail to: EPWA c/o Amy Graybill, 335 W Perry St., Enola, PA 17025

Admission: Adults - \$4.00 Students - \$1.00 Food will be available for purchase.

Contact Information: Andrew Mauer 717-732-3233 home or 717-802-6828 cell. Or visit our website at

[www.eastpennwrestling.com](http://www.eastpennwrestling.com)

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**\*\*\*Novice\*\*\***

Name \_\_\_\_\_

Age \_\_\_\_\_ Birth date \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Division \_\_\_\_\_ Wt. Class \_\_\_\_\_ Last Year's Record \_\_\_\_\_

Wrestling Experience 1<sup>st</sup> year \_\_\_\_\_ 2<sup>ND</sup> Year \_\_\_\_\_ Honors \_\_\_\_\_

School/Wrestling Club Name \_\_\_\_\_

In consideration of my child's entry, I hereby declare he/she is entering at his/her own risk and free will and I will not in any way hold liable the Tournament directors, officials, EPWA, coaches or East Pennsboro School District for any injuries or losses while competing in or traveling to or from the EPWA tournament

.Parent Signature \_\_\_\_\_ Wrestler Signature \_\_\_\_\_