



# PENNSVILLE MARCH MADNESS TOURNAMENT

## MARCH 16<sup>th</sup>, 2019

### ALL ONE DAY



Tot / Tot Novice, Bantam / Bantam Novice, Midget, Junior, Intermediate.

\*\*No High School Wrestlers

\*\* NOVICE Division is FIRST YEAR wrestlers only\*\*

**LOCATION: Salem County College 460 Hollywood Ave, Penns Grove, NJ 08069**

**In the SCC Field House in the Davidow Hall**

**ENTRY FEE:** \$25.00 Pre-Registered, Max 300 wrestlers (\$30 Friday) email about groups / MAKE CHECKS PAYABLE TO: **PENNSVILLE WRESTLING**

Or register online at [www.pennsvillewrestling.org](http://www.pennsvillewrestling.org) under the tournament tab

**REGISTRATION DEADLINE:** POST MARKED BY March 8, 2019

**ADMISSION:** \$5.00 ADULTS/COACHES, \$2.00 STUDENTS

**WEIGHT CLASS:** Madison System **NO WEIGH INS \*\* Weights can be challenged\*\***

**\*\* NO WALKINS\*\* \*\* NO EXCEPTIONS\*\***

**WRESTLING BEGINS:** **Bantam, Tot Novice, & Junior @ 9:00AM**

**Tot, Bantam Novice, Midgets & Intermediate @ 1:00PM**

**BOUT TIMES:** Tot, Bantam, Midget, & Junior 1-1-1, Intermediate 1-130-130

**FORMAT:** Round Robin (Goal is 5 wrestlers per bracket in hope that every wrestler gets 3-4 matches) Headgear and Singlet mandatory.

**AWARDS:** Trophies 1<sup>st</sup> 2<sup>nd</sup> 3<sup>rd</sup> place

**Concessions will be available all day**

VERIFICATION OF AGE SHOULD BE DONE UPON REQUEST WITH BIRTH CERT.

TOT – 2012 - 2013

BANTAM -- 2010 - 2011

MIDGET -- 2008 - 2009

JUNIORS -- 2006 - 2007

INTERMEDIATES -- 2004 - 2005 **(no high school wrestlers)**

Wrestler Name: \_\_\_\_\_ Phone# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Yrs Exper. \_\_\_\_\_

Birth Date : \_\_\_\_\_ Division : Tot Tot Novice Bantam Bantam Novice Midget Junior Intermediate

Team \_\_\_\_\_ Email: \_\_\_\_\_ Record: \_\_\_\_\_

Tournament Accomplishments \_\_\_\_\_ Actual Weight: \_\_\_\_\_

Consent : I hereby give permission for my child to participate in the Pennsville Youth Tournament and release the Pennsville Wrestling Organization as well as their representatives, agent, assigns and referees from all liability.

Parents Signature: \_\_\_\_\_

Send To: Lisa Hagan, Secretary

Wrestlers Signature: \_\_\_\_\_

154 South Washington Drive

**ANY QUESTIONS EMAIL – [pennsvillewrestlingassociation@gmail.com](mailto:pennsvillewrestlingassociation@gmail.com)**

Pennsville NJ 08070