

2nd Annual General Summer Brawl

Saturday April 24, 2010

**Tournament Director: Anthony Franklin Phone: (540)
333-2306**

E-

Mail: acf2044@email.vccs.edu

**Location- Stonewall Jackson High School (Quicksburg).
150 Stonewall Lane Quicksburg, VA 22847**

**Weigh-ins- - Satellite Weigh-ins, only done by a coach
or parent, Friday April 23rd anytime up to 8:00
p.m. by E-Mail at acf2044@email.vccs.edu
- On-site weigh-ins will be done Saturday
morning 7:00a.m. - 8:30 a.m.**

**Awards: 1st, 2nd and 3rd place in each weight class will
receive medals.**

**Entries: Registration forms should be handed in
Saturday morning before the tournament.**

**Divisions: PEEWEE Grades- K-5
 MIDDLE Grades- 6-8
 HIGH SCHOOL Grades- 9-12**

**-YOU MAY WRESTLE UP ONE AGE DIVISION WITH A FEE OF
\$10 EXTRA**

Match Length: PW-MS: 1-1-1, HS 2-1-1

WRESTLING STARTS AT 10:00 A.M. FOR ALL DIVISIONS

**Weight Classes: Weight classes will be determined after weigh-ins
Saturday morning.**

**Cost: Registration Fee of \$20.00. Payment will be collected Saturday morning at
the door.**

Checks should be made to Stonewall Jackson High School Wrestling.

\$5 admission fee for all-day(spectators AND coaches)

NO USA CARD REQUIRED

**Directions: *From I 81--From the North:* take exit 269, turn right off of exit ramp,
school will be on the right in .5 miles.**

--From the South: take exit 269, turn left off of exit ramp, school will be on the right in .5 miles.

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Release Form:

Upon the consideration and acceptance of

(Name of Wrestler)

As a participant in the 2nd Annual General Summer Brawl, I hereby waive any and all claims against Stonewall Jackson High School and any other individuals or groups associated with the event that may occur from injury of the above named wrestler, resulting directly or indirectly from his/her participation in the 2nd Annual General Summer Brawl. I further acknowledge the risk in the sport of wrestling and assume all such risks.

Wrestler Name _____

Address _____

E-Mail Address _____

Phone Number _____

Age _____ **Grade** _____ **Division** _____

Weight _____

School/Club _____

Parent/Guardian Signature _____

Date _____

