

# 5<sup>th</sup> Annual Nutley Open Wrestling Tournament

## Sunday, December 4, 2011

**SPONSORS:** Nutley Wrestling Booster Club

**PLACE:** Nutley High School, 300 Franklin Avenue, Nutley, N.J. 07110

**TIME:** Sunday, December 4, 2010

Split Sessions: Bantams Midgets 8:00 am, Juniors and Intermediates 12:00 pm  
4 mats in two gyms

**WEIGH-INS:** All weigh-ins are on Friday, December 2, 2010 from 5:30pm - 7:00pm

**WEIGH-IN LOCATION:** HIGH SCHOOL Main Lobby

**LIMIT - FIRST 300 WRESTLERS** \*\* Walk-ins at weigh-in only if numbers permit \*\*

**STYLE:** New Jersey High School Rules apply - **HEADGEAR IS MANDATORY**

**Modified Double elimination: Consolation match to Loser of Qtr final match**

**AGE/WEIGHT:**

AGE	DIVISION***	WEIGHT CLASS
'04-03 (7&8)	<b>BANTAM</b>	40-45-50-55-60-65-70-75-80-85-HWT
'02-01 (9&10)	<b>MIDGET</b>	50-55-60-65-70-75-80-85-90-95-100-110-HWT
'00-99 (11&12)	<b>JUNIOR</b>	65-70-75-80-85-90-95-100-105-112-119-126-135-145-HWT
'98-97(13&14) <b>(NO Freshmen)</b>	<b>INTERMEDIATE</b>	75-80-85-90-95-100-105-112-119-126-135-145-150 HWT (151-174)-SUPER HWT (175+)

<b>MATCH LENGTH:</b>	<b>BANTAM/MIDGET</b>	<b>JUNIOR</b>	<b>INTERMEDIATE</b>
	1,1,1	1,1.5,1.5	1,1.5,1.5

**AWARDS:** Awards to first three places in each weight class.

**ENTRY FEE:** Pre-registration no later than November 23, 2011 **\*\*\$25\*\***  
Make checks payable to **Nutley Wrestling Booster Club**  
**PLEASE DO NOT SEND CASH!**

**MAIL CHECKS TO:** Frank DiPiano at 40 North Spring Garden Ave. Nutley N.J. 07110.

**INFORMATION:** Contact Frank DiPiano 973 600 5859 or Phil Ferinde 973 979 6063

**\*\* FOOD WILL BE AVAILABLE ALL DAY \*\***

**\*\* NO REFUNDS \*\* NO FOOD in GYM, NO STROLLERS OR CARRIAGES ALLOWED IN THE GYM \*\***

**\*\* PARENTS ARE RESPONSIBLE FOR THE SAFETY AND BEHAVIOR OF THEIR CHILDREN \*\***

### 2011 REGISTRATION FORM

(PLEASE PRINT CLEARLY)

Wrestlers Name:

(Last) \_\_\_\_\_ (First) \_\_\_\_\_

Team Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

Division: \_\_\_\_\_ Weight Class: \_\_\_\_\_ Age: (Date of Birth) \_\_\_\_/\_\_\_\_/\_\_\_\_

Address: (Street) \_\_\_\_\_ (Town) \_\_\_\_\_ (Zip Code) \_\_\_\_\_

Seeding Information:

Wins \_\_\_\_ Losses \_\_\_\_ (Current Season) \*\* Tournament Finishes (2009-2010): 1st \_\_\_\_ 2nd \_\_\_\_ 3rd \_\_\_\_

State Place Winner (Place, Division and Year): \_\_\_\_\_

Please register my child in the Nutley Wrestling Tournament. He has been examined by a physician and to the best of my knowledge is physically fit to engage in this activity. I Acknowledge the Nutley Wrestling Tournament Sponsors WILL NOT BE RESPONSIBLE FOR INJURIES OR LOSSES by any participant traveling to or from and or participating in this tournament and that my child is covered by medical insurance that will cover him in case of accident or injury.

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

Directions to NHS at <http://www.nutleyschools.org/home/nhs/sports/directions.htm#Tangorra>