

Sayville Freestyle Festival

Sayville Middle School 291 Johnson Ave, Sayville NY 11782

Saturday June 11, 2022

Divisions: 14U (Schoolboy), 16U (Cadet), Junior (Boys and Girls)

All wrestlers must have a valid USAW card. Cards can be purchased at www.usawmembership.com

Weigh-ins: Friday or Saturday

Friday 6/10- Suffolk: 7:00PM-8:00PM– Sayville Middle School 291 Johnson Ave, Sayville NY 11782

Nassau: 7:00PM-8:00PM - Savage Wrestling Academy, 405 Oakwood Rd Huntington 11743 next to the Signorama Building

Satellite Weigh-ins can be requested for Friday night 6/10 by a USA Sanctioned club and would need to be submitted by 8:30PM. Please contact Michael at [631-833-5799](tel:631-833-5799) to request satellite weigh-ins.

Saturday 6/11 – 8:00AM-8:45AM

Wrestling Starts at 9:30AM

Entry Fee: \$40.00 (cash only)

Format: Madison weights – 4-5 Man Round Robin- Freestyle (Pool sizes will be determined number of participants)

14U Division: Born 2008-2009 – Schoolboy, 16U Division: Born 2006-2007 – Cadet and Junior Division: Born 2002 & after, plus enrolled in 9th-12th grade

Name: _____ **Club:** _____

Division: Circle 1 Boys: Junior 16U Cadet 14U Schoolboy Girls: Junior 16U Cadet 14U Schoolgirl

If not enough girls, boys and girls pools may be combined

USAW Card#: _____ **Date of Birth:** _____ **Phone:** _____

Street: _____ **City:** _____ **State:** _____

We, the parents/guardians of _____ assume full responsibility for our child in case of any injuries he or she may receive traveling to, during or traveling from the wrestling tournament held at Sayville Middle School on June 11, 2022 or associated with registration and/or weigh-ins. This contest indicates that I will assume all responsibilities for accident insurance and will hold harmless the tournament officials, referees, volunteers, coaches, all members of the Sayville School District and their agents.

Parent/Guardian Signature _____

Signature indicates permission to participate as well as acknowledgement of adequate medical coverage in case of injury, and permission to publish any and all photos, videos, and information regarding participants in the event(s).

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We, the parents/guardians of _____ assume full responsibility for our child in case of any injuries he or she may receive traveling to, during or traveling from the wrestling tournament held at Copiague High School on May 9, 2015 or associated with registration and/or weigh-ins. This contest indicates that I will assume all responsibilities for accident insurance and will hold harmless the tournament officials, referees, volunteers, coaches, all members of the Copiague School District and their agents.

Parent/Guardian Signature _____

Signature indicates permission to participate as well as acknowledgement of adequate medical coverage in case of injury, and permission to publish any and all photos, videos, and information regarding participants in the event(s).