2013 KING OF THE MAT



Location: Belleville West High School, 4063 Frank Scott Parkway, Belleville, IL, 62223

Cost: Pre-Registration Only - \$20/ea (325 max)

Admission: Adults (14 and over) \$5... Wrestlers, Coaches, and 14/u kids are free!

Age Groups: 6/u, 8/u. 10/u, 12/u, 15/u (8^{TH} grade and under only)

*Girls division when possible (please mark on your roster)

Bracketing: 8 man and 4 man round robin brackets as needed.

(*We will try to separate wrestlers by experience and weight)

Weigh In: 6:00 – 7:30am / Wrestling starts approx 9:00am

Awards: *Custom Awards 1st-5th

Concessions: Available throughout the day

For Information Contact: Ryan King 616-709-6636

Email Pre-Registration Only:

Emailed rosters to <u>rking@kingselectwrestling.com</u> must be received by Fri, Dec20th at 10pm. Please email the following information for each wrestler:

(Name / Age Division / IKWF or USA card # / years of experience / 2012-2013 record)

*We will send you a confirmation email ASAP. If you do not receive a confirmation email within 24 hours, your registration is not complete. Please call Coach King directly at 618-709-6636 if there is a problem.

*Team PAYMENT and WAIVER FORMS due before wrestlers can obtain a weigh in card.

In consideration of your acceptance of this entry, I intend to be legally bound hereby for myself, my heir, executors and administrators, waive and release KING SELECT WRESTLING LLC, BELLEVILLE TOWNSHIP HIGH SCHOOL DISTRICT 201, THEIR AGENTS, REPRESENTATIVES, VOLUNTEERS, AND/OR COMMITES FROM ANY AND

ALL CLAIMS OR RIGHTS TO DAMAGES FOR INJURIES OR LOSSES SUFFERED BY ME DIRECTLY OR INDIRECTLY WHILE TRAINING, COMPETEING, ATTENDING OR TRAVELING TO OR FROM THE KING OF THE MAT WRESTLING TOURNAMENT.

Wrestlers Name	Date
Parent/Guardian Signature _	

^{*}Must pay for ALLwrestlers on team roster.

^{*}NO refunds for scratches - We will allow up to 3 substitutions per team.

^{*}All wrestlers and coaches must have a current USAW or IKWF card.