

BRONCS WRESTLING CLUB

Summer DUALS 2019

Saturday June 29th

Location: Student Rec Center, Rider University

Entrance Fee: \$400 Per Team

Eligibility: If you have completed 8th grade you must wrestle in the HS Division

Weights: (Plus 2lb. Allowance; Example - 45=47)

K-8:45,50,55,60,65,70,75,80,85,90,95,100,105,112,119,127

Weigh INS: 7am - 8am

Wrestling Starts: 9am

Registration: Return entry form by **June 1st**

Format: 20 Team Dual tournament on 10 mats, each team will wrestle 5 matches. Teams are divided into 4 Pools of 5. Each team will wrestle all the teams in their pool. Based on how you finish in your pool, that will determine all cross over matches.

Awards Top 4 teams will receive awards and medals for all wrestlers.

Schedule of Events and additional information available at BroncsWrestling.com

Please contact CoachHangey@BroncsWrestling.com, 609-209-1302,
jerb@mullerbev.com, 267-907-4807 for questions.

Please detach and mail this form to Broncs Wrestling Club, 158 Carlton Avenue, Marlton, NJ 08053, and make the check payable to "Broncs Wrestling Club"

Team Name: _____ Coach: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

I am the adult responsible for the above team/club and give my permission for all the team members to compete in the duals sponsored by The Broncs Wrestling Club, a registered 501 (c)(3) organization. I hereby release and hold harmless The Broncs Wrestling Club, its officers, coaches, members, and volunteers and Rider University and its trustees from any and all liability incurred as a result of participation in or travel to and from the duals. I recognize that wrestling is a contact sport and that there are certain risks of injury inherent in the sport of wrestling. Parents/Guardians are responsible for the safety and behavior of their own children. This event is independently owned and operated by the Broncs Wrestling Club. The Broncs Wrestling Club is not affiliated with Rider University in any way.

Coach/Team Representative (print): _____

Coach/Team Representative (signature): _____ Date: _____