

# Lancer Wrestling Club **Middle School** Championships

**WHERE:** La Crescent High School, 1301 Lancer Blvd., La Crescent, MN 55947

**WHEN:** Saturday, January 26, 2019

**ENTRY FEE & REGISTRATION:** PRE-REGISTRATION ONLY - \$15.00 Individual Entry Fee 15+ person Team Fee: \$200  
Must Pay and Register on Trackwrestling ([www.trackwrestling.com](http://www.trackwrestling.com)) by 10:00pm Thursday January 24, 2019  
**LIMITED WALK INS – NO USA Card Required**

**CHECK-IN:** Wrestlers check in 12:00 to 1:00 p.m.  
**NO WEIGH INS/ HONOR SYSTEM** – Please be sure to enter information accurately when registering. Tournament personnel reserve the right to spot check athletes. If weight is not within reason, wrestler will not be eligible for awards and may forfeit matches and entry fee.

**Assisted Warm-up from La Crescent Wrestling Coaches at 12:30 Wrestling starts at approximately 1:30p.m.**

**RULES:** High School Rules, three 1 1/2 minute periods, overtime sudden victory  
**One Coach in Coach's Corner**

**GRADES:** 6<sup>th</sup> – 8<sup>th</sup> grade ONLY

**MATS/BRACKETS:** 3 Full Mats! 4-man round robins where possible

**AWARDS:** Trophy for 1<sup>st</sup> Place, Medals for 2<sup>nd</sup>, 3<sup>rd</sup>, and 4<sup>th</sup> Places. **HUGE Trophies for Team Points,**

**ADMISSION:** Adults \$3/Children \$1/4 years and under free – **Concessions on Site – No Coolers Please**

**For information contact:** Garret Griffin – 920-538-5737; email - [lchwrestling@isd300.k12.mn.us](mailto:lchwrestling@isd300.k12.mn.us) or  
Greg Ruben – 608-385-4074; email – [greg.ruben@bench.com](mailto:greg.ruben@bench.com)

**CANCELLATION:** In case of bad weather, call 920-538-5737 or 608-385-4074 to verify we are on, no refunds

**All wrestlers must have a signed waiver (below) to turn in at Check-in**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Wt. \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ OR, Wrestling Club: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

I give permission for the person named above to participate in the Lancer Wrestling Club Championships. I waive all claims against the Lancer Mat Club, School District 300, and all persons involved with this tournament, for any injuries from attending, participating in, or traveling to and from this event.

Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_