



2016 FRANKLIN COUNTY KAHILA MOONSHINE CLASSIC

SATURDAY, FEBRUARY 11, 2017

Location: Franklin County High School
700 Tanyard Road Rocky Mount, VA 24151

Registration: Pre-Registration: \$20.00 per wrestler. Register on Track Wrestling
Register by 5pm Friday, February 10th 2017
\$3 FOR SPECTATORS

No walk-in registrations will be accepted.

Weigh-ins: 7-8am

Matches Start: 9am

- **ALL** wrestlers must weigh-in. Weigh-in uniform is singlet, no socks or shoes. 1LB uniform allowance.
- **FORMAT:** Round Robin whenever possible to increase mat time. If necessary, the director reserves the right to combine or alter divisions and weight classes.
- **INDIVIDUAL AWARDS: 1st - 3rd Place:** Medals
- The tournament will follow VHSL rules. Undefeated wrestler wins, regardless of points.
- **TEAM TROPHIES:** Trophies presented to the Top 3 Teams. Each team selects 10 wrestlers before the competition starts for the team. Coaches who are interested please request a form when you register your team.
- **We are using TrackWrestling.com for all brackets, results, and information!**

DIVISIONS: WEIGHT CLASSES:

6U 35, 40, 45, 50, 55, 60, 65, HWT **8U** 40, 45, 50, 55, 60, 65, 70, 75, 80, 90, HWT **10U** 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 110, 120, HWT **13U** (Middle School) 70, 75, 80, 85, 90, 95, 100, 105, 110, 115, 120, 125, 130, 140, 150, 160, 170, 180, HWT **OPEN WEIGHT**,

High School weight classes will be formed using the Madison

System. *NOTE: Age as of November 24, 2016. The day is used to determine the age you can start school in Virginia.*

Tournament Director: Richard Hopkins (C) 540-238-9578



Officials

ENTRY SHEET / WAIVER OF LIABILITY

I approve of my child entering the Franklin County Kahila Moonshine Classic Wrestling Tournament and hereby release the Franklin County Booster Club, its agents and representatives from any responsibility or liability for injury to the entrant listed below who is participating in this wrestling tournament. I have thorough knowledge of the risks in the sport of wrestling and I assume those risks. I also certify that the entrant has no injuries or health considerations that would preclude wrestling in this tournament.

Wrestler: _____

Parent

Signature _____

TOURNAMENT USE ONLY

Date of Birth: _____

Weight: _____ **DIVISION:** _____