

PRE REGISTRATION REQUIRED
Connecticut Kids State Championship Sunday March 1, 2009
Rules & Application for Novice & Middle School Divisions
from Connecticut Qualifying Tournament

Congratulations for qualifying for the Kids State Championship, which will be held at **Hill House High School Field-house, 480 Sherman Parkway, New Haven, CT 06511** to be operated by USAWCT on Sunday March 1, 2009. By placing top four in this District you are eligible to compete In the USAWCT Kids State championship, however, you must submit this form with payment payable to USAWCT in the amount of \$ 20.00 to insure your place in the State Championship. A USAWCT State Club Director will be on site to collect the applications. If any of the TOP FOUR (4) place winners do not complete and pay before leaving this Qualifier, then the fifth place winner will be awarded the fourth place spot. The other place winners will move up. Example: the 3rd place wrestler does not complete this form and does not pay. The fourth place finisher moves to 3rd and the fifth place finisher will be the fourth seed from this District.

Weigh-ins for the USAWCT State Championship Tournament will be held at 7:30 to 8:00 am for Intermediate and 10:00 to 10:30 am for Novice Division, 10:30 to 11:00 Middle School in which all wrestlers must be present at the beginning of weigh-ins and each wrestler must make scratch weight for the weight they qualified for, NO WEIGHT ALLOWANCE. Each wrestler will be allowed two consecutive attempts to make weight and may not leave the weigh-in area. Wrestlers must weigh-in wearing a competition Singlet. A WRESTLER THAT MISSES WEIGHT WILL BE DISQUALIFIED FROM THE KIDS STATE CHAMPIONSHIP TOURNAMENT.

Trophies will be given to the top four finishers in each Division and weight class. Full mats will be used for the USAWCT KIDS STATE CHAMPIONSHIP TOURNAMENT. **This tournament will NOT have true wrestle back for 2nd**. During weigh-ins, all competitors will be inspected for communicable skin disease. Wrestlers with communicable skin disease will not be allowed to compete unless they have a current doctor's excuse saying they are under treatment, are not contagious as of a specified date and are cleared to wrestle. Tournament Chief Medical Officer reserves the right to refuse entry to questionable cases.

- \$5.00 Admission fee for spectators
- Emergency Medical Personnel will be on-site.
- \$20.00 entry fee, no Family discount
- Make checks payable to USAWCT FOR \$ 20.00
- For more information: Check our web site USAWCT.org or call Mark Cammisa at 203 790-9209 or email markcammisa@comcast.net
- Breakfast, lunch and snacks available on-site **in designated areas**
- Wrestling equipment will be available for purchase
- Spectators must stay in the stands

No refunds of pre registration fees

There are predetermined weights for Novice and Middle School.

Intermediates- 47, 51,54,58,61,64,68,71,76,81,86,91,96,103,111,119,139

Novice- 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 112, 120, 130, 140, 165

Middle School- 70, 77, 84, 91, 98, 105, 112, 120, 128, 136, 144, 152, 160, 175, 190, 210, 250.

THERE WILL BE A SCALE OPEN AT 6:45 am to 7:20 am TO CHECK YOUR WEIGHT, YOU WILL NOT BE ABLE TO CHECK YOUR WEIGHT AFTER 8:00 am. for Middle School Division, 8:30 am for Novice

NEW: Qualifying for the New England Championship Tournament

The top three finishers (3) of the **USAWCT Kids State Championship Tournament** for the Middle School Division in each of the above listed weight classes will be eligible to advance to the New England Championship Tournament, which will be held at Hudson High School, located in Hudson Mass on March 8, 2009.

In addition, the top three finishers (3) of the **USAWCT Kids State Championship Tournament** for the Novice Division in each of the above listed weight classes will be eligible to advance to the New England Championship Tournament, which will be held at Hudson High School, located in Hudson Mass on March 8, 2009.

Each of the top three place winner of the USAWCT Kids State Championship Tournament will be required to ***complete a registration form***, hand in a copy of their ***Birth certificate***, a ***copy of their USA Wrestling Card and pay \$20.00*** (of the \$30.00 total entry fee) either with cash or a check made payable to USAWCT, prior to leaving our State Championships held on March 1, 2009 at Hill House High School Field House. This year the entire entry fee for the New England Championship Tournament is \$30.00 per wrestler, however, USAWCT will pay the balance of \$10.00 for each Connecticut wrestler that places and registers as detailed above.

Connecticut Kids State Championship Application
For Intermediate, Novice & Middle School Division from Connecticut
PRE REGISTRATION REQUIRED

NAME..... DATE OF BIRTH

STREET.....CITY.....

...

STATE.....ZIP..... email address.....

TELEPHONE.....2008-2009 USAW CARD #.....

Site of Qualifying Tournament _____

Wrestlers placement at qualifying tournament _____ **Division** _____

Weight Class _____

Waiver and Release from Liability

1. I, _____ the undersigned, on behalf of myself, my heirs, and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasers") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliate clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers,, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors, and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasers") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releaser understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision, or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releaser acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releaser, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and other losses to person or property, including death, and that severe social and economic losses may also result not only from Releaser's own actions, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Furthermore Releaser acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

(Signature of Wrestler)

(Print Name)

DATE

The undersigned _____ does hereby represent that he/she is, in fact, the parent or guardian of _____ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

(Signature of Parent or Legal

Guardian and Relationship to Minor)

Print Name _____

☐ I do not wish to compete in the Kids State Championship, March 1, 2009 and have checked this box.

Payment Method Check or Cash _____