



Barrington Brawl

Open Folkstyle Wrestling Tournament – April 3, 2011

Each wrestler must provide their own insurance. Open to the first 500 entrants

USA wrestling cards must be present at weigh-ins

Location: Barrington High School 616 Main Street, Barrington, IL 60010

Divisions: 7-8, 9-10, 11-12, 13-14, Frosh-Soph, and Junior- Senior divisions

Every effort will be made to bracket in 4 man round robin format separate wrestlers by weight and grade, but we reserve the right to make a one division adjustment if necessary and reasonable.

T-Shirt for Champion

Weigh in 7:00 to 7:45 A.M. LATE COMERS WILL NOT WRESTLE!!! Wrestling will begin at 9:00 AM.

Entry Fee: \$15 pre-registered (**nonrefundable**) if received on or before April 1, 2011.

\$20 at the door. Limited to the first 500 entries received.

Make checks payable to: Barrington MAT Club

QUESTIONS: Scott Shealy @ 847.875.2867 or scottjshealy@comcast.net

Mail check and release to: Mike Thorn, ATTN: Barrington Mat Club, 1810 Nicholson Drive, Hoffman Estates, IL 60192

Insurance: Participants must provide own insurance, complete and sign the attached waiver.

Concessions: Concessions will be available all day during the event.

Admission: Adults \$4, Children 10 & Under – Free

All wrestlers must sign in at the registration table.

Entry Form (return with payment by April 1, 2011)

Release - The undersigned wrestler and the parents or guardian of the wrestler hereby represents to the Barrington MAT Club as a sponsor of the Barrington Brawl that the wrestler’s health is and will be sufficient to allow the wrestler to safely participate in the tournament. The undersigned understands and accepts that no health examination will be conducted by the Barrington Mat Club to determine the wrestler’s fitness to participate in the tournament and that health and accident insurance coverage of the wrestler, if any, is the sole responsibility of the undersigned. The undersigned understands and accepts that the wrestler participates in the tournament at the wrestler’s own risk. The undersigned understands and agrees not to make any claims or bring any lawsuit for personal injury , death, property damage, or loss which arise out of the wrestler’s participation in the tournament against the Barrington Mat Club, it’s Agents, Barrington High School, or District 220. The terms “Barrington Mat Club” and Barrington High School” and “District 220” include the governing board of these entities and their officers, employees, and agents.

Participant’s Name _____

Address _____

City/Zip _____

Phone _____

Current Grade: _____ Age: _____ Wrestling Record: _____

USA wrestling card # _____

Parent/Guardian Signature _____ Date _____