

COBRA CHALLENGE

TEAM COBRA WRESTLING

DATE : NOVEMBER 21, 2009

LOCATION: EASTERN VIEW HIGH SCHOOL / 16332 CYCLONE WAY, CULPEPER, VA., 22701

TIME : CHECK IN TIME : 7 - 8:00 A.M. / COACHES MEETING AT 8:30 A.M. / WRESTLING TO BEGIN BY 9:00 A.M.

FORMAT : FOLKSTYLE USING VHSL RULES. HEADGEAR NOT REQUIRED . WRESTLE BACKS FOR TRUE 2ND / ALL REFEREES DECISIONS ARE FINAL / 5 MIN. MINIMUM BETWEEN MATCHES / NO REST TIME GUARANTEE FOR ANYONE COMPETING IN TWO DIVISIONS MATCH TIMES : 1.5 - 1 - 1 / ROUND ROBIN FORMAT FOR 5 OR LESS ENTRIES IN A WEIGHT CLASS

WEIGHT : MADISON SYSTEM
CLASSES

DIVISIONS : K - 2ND / 3RD - 5TH / 6TH - 8TH

REGISTRATION : NO WALK-INS. **PRE - REGISTERED ONLY** / SATELLITE WEIGHTS MUST BE RECEIVED BY 8 P.M. ON NOVEMBER 19, 2009. REGISTRATION WILL CLOSE ONCE THE FIRST 300 WRESTLERS REGISTRATION INFO AND ENTRY FEES HAVE BEEN RECEIVED.

EMAIL REGISTRATIONS INFO TO : bbrowntown8@aol.com / or jenkined@juno.com FOR INTERNET LISTING. SEND SIGNED REGISTRATION FORM / FULL PAYMENT TO : JANET BROWN / 8443 KILBY WOODS DR., CULPEPER, VA. 22701

CHALLENGE : AVAILABLE DURING THE FIRST 30 MIN. AT THE END OF LISTED SCALES CHECK-IN TIME. MUST BE WITHIN 3 LBS. OF REGISTERED WEIGHT. ALL CHALLENGES WILL NEED TO BE REPORTED TO A TOURNAMENT OFFICIAL DURING THE LISTED TIME. ALL CHALLENGERS WILL SUBMIT TO A WEIGHT CHECK IF REQUESTED BY THE INDIVIDUAL BEING CHALLENGED. PLEASE BRING A COPY OF A CURRENT REPORT CARD IN CASE YOU ARE CHALLENGED.

NO REPORT CARD = NO PROOF = NO WRESTLING !!!

ENTRY : \$25.00 / ADDITIONAL \$ 15.00 TO COMPETE IN ANOTHER DIVISION.
FEE ALL CHECKS MADE PAYABLE TO : **TEAM COBRA WRESTLING**
PLEASE REGISTER EARLY. NO REGISTRATION FORMS WILL BE ACCEPTED AFTER THE NOV 19, 2009 / 8 P.M. DEADLINE.
REGISTRATION WILL CLOSE ONCE THE FIRST 300 ENTRY FEES ARE RECEIVED.

**AWARDS : CUSTOM EMBROIDERED TOURNAMENT
CHAMPION BACKPACK & TROPHY / 2ND & 3RD PLACE
MEDALS !!!!**

CONCESSION : AVAILABLE ALL DAY / SERVING BREAKFAST & LUNCH
NO COOLERS ALLOWED / REASONABLY PRICED CONCESSIONS !!

ADMISSION : \$2 ADULTS / 10 - UNDER & ALL REGISTERED WRESTLERS FREE.

FACILITES : NEW SCHOOL (2YRS NEW) WITH CLEAN RESTROOMS & SPACIOUS
BLEACHERS.

MATS : TOURNAMENT WILL UTILIZES 4 OR 5 MATS (DEPENDS ON REG. #'S) /
SHOE SANITIZING STATIONS WILL BE LOCATED AT MAT ENTRY.

ATHLETIC : A CERTIFIED ATHLETIC TRAINER WILL BE ON-SITE ALL DAY.
TRAINER

TOURNAMENT DIRECTORS :

EDDIE JENKINS : 540-937-375 (H) / 540-229-7823 (W) / jenkined@juno.com

JANET BROWN : 540-547-2508 (H) / 540-718-2644 (W) / bbrowntown8@aol.com

AAU CARDS REQUIRED : CARDS CAN BE PURCHASED @ WWW.AAUSPORTS.ORG

**PLEASE NOTE : THE FIRST 300 PAYED REGISTRATIONS WILL BE
ACCEPTED. SENDING YOUR REGISTRATION DOES NOT
GUARANTEE YOUR ENROLLMENT IN TOURNAMENT. PLEASE
REGISTER EARLY. ALL INTERNET LISTED WRESTLERS WILL BE
POSTED AS PAYED ONCE ENTRY FEES ARE RECEIVED.**

**REGISTERED WRESTLERS WILL BE LISTED
ON THE INTERNET AT THE FOLLOWING
LOCATIONS :**

VIRGINIAWRESTLING.COM (FORUM ; YOUTH)

COBRA CHALLENGE REGISTRATION

PLEASE COMPLETE & SEND WITH FULL REGISTRATION PAYMENT TO :
JANET BROWN @ 8443 KILBY WOODS DRIVE, CULPEPER, VA. 22701. MUST
BE RECIEVED NO LATER THAN 8 P.M. ON NOVEMBER 19, 2009.

PLEASE MARK ONE :
ONE AGE GROUP = \$25.00 TWO AGE GROUPS = \$40.00

PARTICIPANTS NAME :
(PLEASE PRINT FULL NAME)

DATE OF BIRTH / CURRENT SCHOOL GRADE :

REGISTERED WEIGHT :

(ALL REGISTERED WEIGHTS ARE SUBJECT TO CHALLENGE. PLEASE SEE CHALLENGE
SCALES INFO LISTED ON TOURNAMENT INFORMATION.)

AAU # :

SCHOOL AND / OR CLUB (IF APPLICABLE) :

EMAIL :

PHONE # :

ACHIEVEMENTS (PLEASE LIST SOME OF YOUR HIGHEST ACHIEVEMENTS SO WE CAN
PROPERLY SEED THE TOURNAMENT :

WAIVER OF LIABILITY AND AGREEMENT TO INDEMNIFY : IN CONSIDERATION OF YOUR
ACCEPTING MY CHILDS ENTRY INTO THIS TOURNAMENT, I HEREBY, FOR MYSELF, MY HEIRS, EXECUTORS, AND
ADMINISTRATORS, WAIVE AND RELEASE ANY AND ALL CLAIMS FOR DAMAGES I MAY HAVE AGAINST EASTERN
VIEW HIGH SCHOOL, TEAM COBRA WRESTLING, AAU SPORTS, ITS EMPLOYEES AND AGENTS FOR ANY PROPERTY
DAMAGE OR LOSS SUFFERED BY MYSELF OR MY CHILD, AND FOR ANY INJURY SUFFERED BY MYSELF OR MY
CHILD DURING THIS ACTIVITY. FURTHER, I AGREE TO INDEMNIFY AND HOLD HARMLESS THE SAID
DEPARTMENT AND COUNTY, ITS EMPLOYEES AND AGENTS, FROM ANY LIABILITY IT OR THEY MAY INCUR FOR
INJURY TO ME, OR MY CHILD WHILE PARTICIPATING IN, TRAVELING TO, OR ATTENDING SUCH ACTIVITY OR FOR
THE DAMAGES OR LOSS OF PROPERTY. THE DECLARATION OF ANY PORTION OF THIS AGREEMENT AS VOID OR
UNENFORCEABLE SHALL NOT TERMINATE ANY OTHER PORTION OF THE AGREEMENT AND THE REMAINING
PORTIONS SHALL REMAIN IN FULL FORCE AND EFFECT.

WRESTLERS SIGNATURE :

PARENT / GUARDIAN SIGNATURE :