41st ANNUAL TULPEHOCKEN ELEMENTARY WRESTLING TOURNAMENT



DATE: Saturday February 24, 2024.

TIME: Split Start 6U and 8U 8:00 AM start 10U and 12U 12:00 PM start

WHERE: Governor Mifflin Intermediate School, 600 Governor Dr, Shillington, PA 19607

Weigh-In: Honor System. Please submit weight to tenth of a pound. Random weight checks, wrestlers must be within 2 pounds in singlet and wrestling shoes if challenged.

AWARDS: Trophies will be given to top 3 place winners in each bracket.

FORMAT: 5 Man Round Robin. Madison system will be used. Guaranteed two matches.

RULES: PIAA modified. Headgear is mandatory. Certified officials. Wrestlers may compete in one division only.

All bouts 1-1-1, OT – sudden victory. First 250 wrestlers!!!! Enter early!!! Tournament sells out fast!!!

ENTRY FEE: \$30/wrestler

\$28/ wrestler for teams of 10 or more. **Team entries due by 2/17/2024 for discount**. **Email team**

entried to jsstoltz@live.com. Email for team entry form.

NO REFUNDS.

CHECKS PAYABLE TO: Tulpehocken Wrestling Association (T.W.A.) MAIL TO: TWA Elementary Tournament, PO Box 171, Bethel, Pa 19507

FOR INFO: Josh Stoltz @ 717-847-9060 or jsstoltz@live.com

www.tulpywrestling.com Admission: Adults \$10.00 Studen Students \$5.00

BREAKFAST, LUNCH, AND SNACKS WILL BE AVAILABLE ALL DAY.

| | | BY A SMOKE FREE/TOBACCO ITHIN BUILDING OR ON SCHOO | FREE ENVIRONMENT. THERE WILL DL PROPERTY. |
|--------------------------|---------------------------------|--|--|
| PLEASE CIRCL | E APPROPRIATE AGE BRA | ACKET OF WRESTLER AS (| OF TOURNAMENT DATE |
| Pee-Wee | | Midget | |
| 6 & Under, limit 80lbs. | 8 & Under, limit 115lbs. | 10 & Under, limit 145lbs. | 12 & Under, limit 180lbs |
| | | ing party must also present p O 7 TH GRADERS REGARDI | |
| BIRTHDAY | AGEWEIGHT | SCHOOL/CLUB | |
| NAME | | PHONE | |
| ADDRESS | | | |
| Association, and tournam | nent officials from any and all | | District, Tulpehocken Wrestling damages or losses suffered by me estling tournament. |

SIGNATURE OF WRESTLER_____DATE____

SIGNATURE OF PARENT/GUARDIAN______ DATE_____