



Middle Atlantic Wrestling Association
2009 East Regional Championships

Tournament Director: Paul Edwards (215) 538-1745
Site: Liberty High School, 1115 Linden St., Bethlehem PA 18018
Tournament Sponsor: Little Hurricanes/Hurricane Wrestling Club
Weigh-In Times:
Friday, April 3 6:00 - 9:00 p.m. for Bantam, Midget, Junior, Intermediate
6:00 - 9:00 p.m. for Advanced, Elite, Open - OPTIONAL
Saturday, April 4 5:30 - 7:30 p.m. for Advanced, Elite, Open (ONLY) at Liberty H.S.

Starting Times:
Saturday, April 4 8:00 a.m. for Bantam, Midget, Junior, Intermediate
Sunday, April 5 8:00 a.m. for Advanced, Elite, Open

Rules: Scholastic rules with minor exceptions. Director has final authority.
Awards: Medals for top four place finishers
Uniforms: Head gear and singlets required (Open Division Exceptions permitted)
Eligibility: Must have placed in the top three in a District Tournament. Fourth place finishers may take the place of one of the first three if applicable.
Important: Once you have qualified for the Regional Tournament you may not enter another District Tournament; anyone who does will be disqualified from advancing.
Advancement: The top four finishers in the East Regional will advance to the Middle Atlantic Eastern National Championships to be held on May 2 and 3 at Wicomico Civic Center, Salisbury, MD.
Note: There will be a match to decide 5th and 6th place; winner will serve as alternate for Eastern Nationals.
Admission: \$5 for each day for adults and \$2 each day for students
Proof of Age: Proof of age must be carried by all contestants at all tournament levels. Any challenge of age requires each wrestler to produce age documentation at the time of challenge or, no challenge is allowed.
Notice: Please fill out the bottom portion of this form, whether going to the Regional Tournament or not. This M.A.W.A. scholastic style tourn. is not affiliated with the AAU. No AAU card is required to participate in the program.

LEAVE THIS FORM WITH THE TOURNAMENT DIRECTOR TODAY!!!!

I as a place winner in the District Tournament WILL _____ or WILL NOT _____ advance to the Regional Tournament. (Please check one)

Place finished in the District Tournament _____ Division _____ Weight _____

Please Print ↓ Note: A \$10 advancement fee for Regionals must be paid with this form.

Name _____ Birth Date _____ Age _____

Address _____

City _____ State _____ Zip _____ Phone _____

I, _____ (name), my parents and family hereby declare that if I am accepted as a participant in the 2009 M.A.W.A. Regional Tournament that I will enter at my own risk and of my own free will and that I will not hold liable the Quakertown School District, their officers, tournament officers or referees, for any injury that I may receive directly or indirectly for travel to or from or competing in this event. I also certify that this contestant is protected by health - or "accident insurance which will compensate me for expenses incurred as a result of an injury received through participation in the tournament. Furthermore, I agree that both myself and my childs coach will be held responsible for our own, and the wrestlers conduct, while attending this event. I am also aware that verbal or physical child abuse or neglect, will or may be, reported to proper authorities if witnessed by tournament officials and could lead to disqualification of the wrestler and possible lawful investigation beyond our borders.

Cell no. () _____ In case we need to reach you during the trnmt.