

NHSCA National Open Wrestling Championships Washington State Qualifier

Style - Scholastic

Location: Sumner High School

Date – March 18th, 2006 (Saturday)

Registration and weigh-ins – 8AM-10AM

Wrestling begins – 11AM

Divisions and weight classes

College Division 125, 133, 141, 149, 157, 165, 174, 184, 197, 285

High School Division (grades 9-12) 103, 112, 119, 125, 130, 135, 140, 145, 152, 160, 171, 189, 215, 275

Middle School Division (grades 7-9) 85, 93, 103, 112, 119, 125, 132, 140, 145, 152, 160, 171, 189, 230

Elementary School Division (grades 4-6) 65, 70, 75, 80, 85, 90, 95, 100, 105, 115, 125, 135, 145, 155

Uniforms - Singlets are required, however, you cannot wear your school uniform

College Division - 2-2-2, consolations 1, 11/2, 11/2

High School Division - 2-2-2, consolations 1, 11/2, 11/2

Middle School Division - 1, 11/2, 11/2, consolations 1, 1, 1

Elementary School Division - 1, 1, 1 consolations 30, 30, 30,

Awards - Medals will be awarded to the top 4 place finishers in each weight class

Advance to the Nationals ... Top 4 place finishers in each weight class

Entry Form

Name _____ weight class ____ grade _____
Division: __college __ high school (gr. 9-12) ____ middle school (gr. 7-9) __elementary school (gr. 4-6)
Email address _____ phone () _____
School _____ coach _____
Season record _____ career record _____ highest wrestling honors _____

**A \$20 event / insurance fee should be mailed with this entry form to secure your spot in the
NHSCA National Open Wrestling Championships State Qualifier**

Championship shirt: include \$10 on this entry form for an official T- shirt at a discounted price. Shirts will be distributed at registration. You may order more than one shirt. Indicate size: __small __medium __large __x-large __ xx-large ____total order

I have enclosed a check for \$_____ which includes \$20 for the event / insurance fee, and the shirt order.

Please make check payable to the Spartain Booster Club

LIABILITY RELEASE I, the undersigned, individually and as a parent/guardian _____ a minor, ask that he/she be admitted to participate in the above NHSCA sponsored event. I do hereby agree to release, discharge and hold harmless the NHSCA, their agents and employees of and from all causes, liabilities, and damages, claims, or demands whatsoever on account of any injury or accident involving the said minor arising out of the minor's attendance at the sporting event or in the course of competition held in connection with this event. I also give permission for my child's photograph to appear in promotional material regarding this event.

PARENT/GUARDIAN SIGNATURE REQUIRED: _____

**Please mail to: Scott Stockslager, 813 7th Ave SW, Puyallup, WA 98371;
Ph: (253) 845-1485 / (253) 376-6156 Email: scstocks@msn.com**