

# 2009 Mayhem in Memphis

## Youth Wrestling Tournament

### Saturday, November 21, 2009

Christian Brothers University  
650 E. Parkway South  
Memphis, TN 38104



**Entry Fee:** \$10.00 per wrestler. **Deadline: 8PM CST Wednesday, November 18, 2009.** Late registration fee is \$10.00 per wrestler. Coaches and wrestlers must have a current USAW Card. Additional weight class or division registration \$5.00 per wrestler, please contact tournament director concerning these registrations.

**Registration:** Online at [www.trackwrestling.com](http://www.trackwrestling.com). For difficulties with online registration send email to [mayheminmemphis@gmail.com](mailto:mayheminmemphis@gmail.com); please include name, DOB, USAW Card #, division(s), weight(s) and last year's record.

**Format:** USA Wrestling 2010 Age Divisions and Weights  
Double Elimination or Round Robin Bracketing  
Bantam, Intermediate and Novice 1-1-1 (30-second overtime period)  
Schoolboy and Cadet 2-1-1 (30-second overtime period)  
Two certified coaches' maximum in each competitor's corner

**Schedule:** First Session – Bantam, Intermediate and Novice wrestling will begin at 9AM  
Second Session – Schoolboy and Cadet wrestling will begin at 2PM

**Weigh-Ins:** Friday 6PM to 8PM (All Wrestlers), Saturday 7AM to 8AM (First Session Wrestlers Have Priority) and Noon to 1PM (Second Session). Wrestlers must weigh-in and make weight; \$10.00 Bracket Change Fee

**Skin Screen:** Athletes must submit to a skin disease screening prior to weigh-in. The chief medical officer has full authority without appeal in determining the eligibility of an athlete to compete.

**Awards:** Medals 1<sup>st</sup> through 4<sup>th</sup> (bracket for Champions) and OW awards for each division. Championship and Consolation Championship matches conclude each session.

**Admissions:** \$5.00 Adults, \$3.00 Students/Children, \$10.00 Family

**Concessions:** Food and Drink will be available all day; with seating accommodations. There will be a hospitality room for officials and coaches.

Emailed registrations and fees are the responsibility of the Head Coach. Coaches are responsible for ensuring wrestlers have a signed liability waiver at weigh-in.

Make Checks Payable to West Tennessee Takedown Club

**For more Information, contact the Tournament Director**  
Eric Sacharczyk (901) 378-6545 or email at [mimtournamentdirector@gmail.com](mailto:mimtournamentdirector@gmail.com)

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650 E. Parkway South  
Memphis, TN 38104

Saturday, November 21, 2009

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Weight: \_\_\_\_\_

Division: \_\_\_\_\_ Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

USA Wrestling Card #: \_\_\_\_\_ Club Name: \_\_\_\_\_

## Waiver and Release from Liability

1. I, \_\_\_\_\_, the undersigned, on behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliated clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releasor understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASORS EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releasor acknowledges and fully understands that each participant in any USA Wrestling sanctioned event Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from Releasor's own actions, in actions or negligence, but also from the actions, in actions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Further Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

The undersigned, \_\_\_\_\_ does hereby represent that he/she is, in fact, the parent or legal guardian of  
(Parent or Guardian)

\_\_\_\_\_ and acting in such capacity, agrees the terms and conditions of the above state waiver and release.  
(Participant)

\_\_\_\_\_  
(SIGNATURE OF PARENT OR LEGAL GUARDIAN)

\_\_\_\_\_  
(RELATIONSHIP)

\_\_\_\_\_  
(PRINT NAME)

\_\_\_\_\_  
(DATE)