



2010 MYAS GOPHER STATE K-6 TEAM TOURNAMENT



Date: Sunday, February 28, 2010

Revised 12/2/09

Location: Simley High School
2920 80th St. E; Inver Grove Heights, MN 55076

Weights: Grades K-6 are eligible for all weights
One set of weights
45, 50, 55, 60, 65, 70, 75, 80, 84, 88, 93, 102, 115, 130, 200

Eligibility: Teams from all states are eligible.
Wrestlers must compete with the team within the community where they reside or attend school. Exception: In situations involving "split families," the wrestler may participate with the team where the mother or father reside.
If there is not a wrestling program within the community where the athlete resides or attends school, they may participate with a bordering community.

Entry Fee: \$175 per team . No additional membership/insurance fees.

Entry Deadline: 3:00pm on Friday, February 19, 2010 or until full

Pre-registration is MANDATORY

Spots for the team tournament will be awarded on a first-come, first served basis.
Registrations will be accepted after the entry deadline if there is space available

Weigh-ins: 8:30-9:30am; athletes must weigh-in with singlet on

- All participants must weigh-in and go through a skin check to be cleared to wrestle. If a wrestler has any type of skin rash, they must present a letter from a doctor or physician. The letter must state that the affliction is not in the contagious phase. Persons conducting the skin checks will make final determinations.
- A test scale will be on-site.
- Limit weight-loss activities to running, spitting, bathroom prior to final weigh-in.
- All other weight-cutting activities are prohibited.
- Singlet or t-shirts and shorts must be worn at this time.

Start Time: Wrestling will begin at 10:00am

Format: 16-team maximum. Each team will get 5 matches.
Tournament format will depend upon the number of participating teams.

Rules: Wrestlers may wrestle up one weight class only from their actual weight.
The complete MYAS Gopher State rules can be found at www.myas.org.
Matches will consist of three 1-minute periods.

This folkstyle competition will be conducted according to the rules as outlined by the MSHSL. This applies to wrestling techniques as well as conduct, attire and decorum on the mat.

- Uniforms:** Singlets and headgear are required; laces must be taped.
- Officials:** High School Certified
- Awards:** 1st-4th place teams will receive an award
- Insurance:** If a wrestler currently has their own medical/accident insurance, there will be no additional card or insurance fees required to participate in the MYAS Gopher State wrestling program. Contact the MYAS if you are in need of insurance.
- Hotel Info:** Will be posted at www.myas.org
- Communication Policy:** Communications will be done via email and the MYAS website, www.myas.org.
Please provide an email address on your entry form.
- Information:** Website: www.myas.org
Email: jeremy@myas.org
Phone: 763-746-1720
- Team Composition Guidelines:** Wrestlers must compete with the team within the community where they reside or attend school. Exception: In situations involving "split families," the wrestler may participate with the program closest to the mother's or father's residence.
- If there is not a youth wrestling program within the community where the athlete resides or attends school the wrestler may participate with a bordering program.
- Any exceptions to the above guidelines require the approval of the MYAS Advisory Committee.



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ENTRY FORM

Dear Coach:

If your team wishes to participate in the 2010 MYAS Gopher State Team Tournament, you must complete this entry form and submit it to the MYAS office with your entry fee on or before the entry deadline (**February 19, 2010**). **Don't delay!**

Team Name _____ Head Coach _____

Home Phone (____) _____ Work Phone (____) _____

Address _____ City/Zip _____

Signature* _____ E-mail _____

WRESTLING ABILITY

Please rank the ability of your team (circle one): (strong) 1 2 3 4 5 (weak)

List 2009-10 win/loss record and other relevant information: _____

REGISTRATION

Entry Fee: \$175.00 per team

Entry Deadline: 3:00pm on Friday, February 19, 2010. Pre-registration is mandatory.

Please make checks payable to "MYAS" and mail your entry fee with the completed entry form to:

MYAS * 4111 CENTRAL AVENUE NE, SUITE 208 * COLUMBIA HEIGHTS, MN 55421

Please Note: The MYAS uses CheckMate verification and recovery services. If your check is returned, the maximum penalty will be assessed according to Minnesota state law.

INSURANCE/WAIVER

*In signing, I verify that the athletes on the official MYAS roster are eligible to compete in the 2010 MYAS Gopher State Team Tournament. Upon your acceptance of this roster, I, my heirs, executors and administrators, intending to be legally bound hereby, waive and release any and all rights I may have against the Minnesota Youth Athletic Services, the Host Organization and their representatives from any and all injuries suffered by the coaches and/or athletes at the specified event. Also, I understand that each of the athletes and coaches need to have medical insurance to participate in the event. If they do not have medical insurance, I will contact the MYAS at 763-781-2220.

