

**7TH ANNUAL
ZACK STRAUSS MEMORIAL SUMMER SLAM
FOLKSTYLE WRESTLING TOURNAMENT**

TOURNAMENT DIRECTOR: RANDY MOYER (610)797-0648

WHERE: SALISBURY MIDDLE SCHOOL, 3301 DEVONSHIRE ROAD, ALLENTOWN, PA 18103

DATE: SATURDAY JULY 24TH, 2010 **WALK ONS:** FRIDAY JULY 23RD 6:00-8:00PM

TIME: 10:00AM-CONCLUSION SATURDAY JULY 24TH 7:00-8:00AM

WEIGH-INS: FRIDAY JULY 23RD 6:00-8:00PM; SATURDAY JULY 24TH 7:00-8:00AM

BANTAM: 8-UNDER – 50, 55, 60, 65, 70, 75, 85, 95 MAX

MIDGET: 10-UNDER – 60, 65, 70, 75, 80, 85, 95, 105 MAX

JUNIOR: 12-UNDER – 65, 70, 75, 80, 85, 95, 105, 115 MAX

ADVANCED: 14-UNDER – 85, 95, 105, 115, 125, 135, 145, 155, 165, 175, 185 MAX

ELITE: 10-11 HIGH SCHOOL – 100, 110, 120, 130, 140, 150, 160, 170, 180, 190, 200, 210, 285 MAX

OPEN: BORN BEFORE 1992 – 135, 145, 155, 165, 175, 185, 205, 215, 295 MAX

TOURNAMENT COMMITTEE HAS THE RIGHT TO COMBINE ANY WEIGHT CLASS

LENGTH OF BOUTS: 11/2, 11/2, 11/2, 1MINUTE OT FOLLOWED BY A 30 SECOND RIDEOUT IF NEEDED.

AWARDS: MEDALS WILL BE GIVEN TO THE TOP 4 PLACE WINNERS

RULES: DOUBLE ELIMINATION; 2, 3 & 4 MAN ROUND ROBINS - MODIFIED P.I.A.A. RULES. P.I.A.A.

OFFICIALS WILL BE USED. EVERYONE MUST HAVE PROOF OF AGE IF CHALLENGED. ANY

ENTRANT WHO FALSIFIES INFORMATION ON APPLICATION WILL BE DISQUALIFIED.

ENTRY FEE: \$20.00 MAIL IN CHECK OR MONEY ORDER-PAYABLE TO FALCON WRESTLING CLUB.

\$25.00 PHONE INS AND WALK ONS.

\$10.00 FOR ANY ADDITIONAL WEIGHT CLASSES ENTERED.

DEADLINE FOR ENTRIES: TUESDAY JULY 20TH, AFTER JULY 20TH, ONLY WALKONS WILL BE ACCEPTED

RETURN ENTRY FORM TO: RANDY MOYER 936 E. FEDERAL ST. ALLENTOWN, PA. 18103

ADMISSION: \$3.00 ADULTS; \$2.00 CHILDREN & SENIORS; CHILDREN UNDER 5 FREE

===== CUT HERE =====

WEIGHT _____

DIVISION _____

NAME _____

SCHOOL _____

ADDRESS _____ CITY _____ ST. _____ ZIP _____

PHONE _____ AGE _____ BIRTHDATE _____ 09-10 GRADE _____

WALK-ONS WILL NOT BE SEEDED

09-10 WIN _____ LOSS _____ CIRCLE ONE JV V LIST 3 TOURNAMENT PLACEMENTS

1) _____ 2) _____ 3) _____

I HEREBY GIVE THIS BOY PERMISSION TO WRESTLE IN THE 2010 SALISBURY FALCON WRESTLING CLUB TOURNAMENT AND RELEASE ALL SPONSORING BODIES, THEIR OFFICERS, TOURNAMENT OFFICIALS, COMMITTEES AND REFEREES FROM ALL LIABILITY. FURTHERMORE I AGREE THAT BOTH MYSELF AND MY CHILD'S COACH WILL BE HELD RESPONSIBLE FOR OUR OWN AND THE WRESTLER'S CONDUCT WHILE ATTENDING THIS EVENT.

PARENTS SIGNATURE _____

WRESTLERS SIGNATURE _____

RETURN ENTRY FORM WITH \$20.00 CHECK OR MONEY ORDER PAYABLE TO FALCON WRESTLING CLUB TO
RANDY MOYER 936 E. FEDERAL STREET, ALLENTOWN, PA 18103