

# PLAINVIEW-ELGIN-MILLVILLE (PEM) WRESTLING

## NYWA District Qualifier Tournament

When: **Friday, March 10, 2017**  
Admission: Adults - \$4.00; Students - \$2.00  
Where: **PEM High School, Plainview, MN**

**NOTE! Because this is a NYWA qualifier, you must purchase an NYWA membership of \$17 and provide this number at registration! For more information and to purchase, go to: [www.nywa-mn.com](http://www.nywa-mn.com)**

**Time:** Doors open at 4:30 pm; Weigh-in 4:30-5:30 pm; Wrestling begins at approximately 6:15 pm

**Eligibility:** **Kindergarten through 8th grade:** Wrestlers will be grouped by grade (k and under, 1&2, 3&4, 5&6, 7&8) and **scratch weight**. We will try to group wrestlers within 10% of each other, weight wise. We do NOT follow the NYWA regional and state weight classes.

**Entry/Fees:** Entries will be **limited to the first 400 entries** on a first-come, first-serve basis. Entry: \$14

Entries must be received by Wednesday, March 8.

**Awards:** - Grades K-6: medals for 1st - 4th; grades 7-8: medals for 1st-2nd.  
- Awards are presented on the stage.

**Rules:** - High School Rules and scoring will be used during matches. However, grade K-4 wrestlers will get one illegal-hold warning before being penalized.  
- Individual clock time will be three 1-minute periods; 1-1/2 min. periods for gr. 7&8.  
- **One mat-side coaching privilege is included with registration fee; one coach per wrestler.**  
- There will be a maximum of four wrestlers per bracket. If needed, true-second matches will be wrestled. Three-person brackets will be wrestled as round-robin.  
- First and second place finishers qualify for the NYWA regional tournament. If a 3-person round robin ends in a tie, all three wrestlers advance to NYWA regional.  
- Out-of-state wrestlers may not advance to a regional NYWA tournament.

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Mail this form along with \$14.00 registration fee to: Norb Marx, P.O. Box 48, Elgin, MN 55932  
(Postmarked no later than Tues., March 7) 507-876-2621

**Make checks payable to: PEM Wrestling Booster Club**

Wrestler's Name: \_\_\_\_\_  
(first) (last)

Mailing Address: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_ Phone: \_\_\_\_\_

School: \_\_\_\_\_ Weight: \_\_\_\_\_ NYWA# \_\_\_\_\_

I certify the above information is correct. I waive all claims for damage or injury incurred during the "PEM District NYWA Tournament." \_\_\_\_\_ has my permission to participate in the tournament, and I accept responsibility for his/her conduct.

\_\_\_\_\_  
(parent's signature)