



22nd ANNUAL CITY HIGH MATPAC WRESTLING CLASSIC



Sponsored by the City High Matpac Wrestling Club

WHERE: City High School, Iowa City - 1900 Morningside Drive

DATE: Sunday, January 26th, 2014

LIMITED TO THE FIRST 350 WRESTLERS

<u>Grade/Division</u>	<u>Weigh-Ins</u>	<u>Wrestling Time (approx.)</u>
K-2 Pee Wee	7:00-8:00 am	8:30-11:30 am
3-4 Bantam	7:00-8:00 am	8:30-11:30 am
5-6 Junior	10:30-11:15 am	11:45-2:45
7-8 Senior	10:30-11:15 am	11:45-2:45

Entry Fee: \$12.00 pre-registration, \$15.00 at the door. Entries must be postmarked by **Wednesday, January 22nd** to be guaranteed a spot in the tournament.

Admission: \$5.00 adults, \$3.00 for children

Awards: Champion Matpac T-shirts and Gold Medal for the champions, medals for 2nd, 3rd, and 4th. Wall charts also for the Champions.

Team Competition: Top 3 teams will be awarded a Team trophy. Sign-up will take place at Registration.

Individual Competition: 4 man round robin. Junior High will wrestle 2-1-1 and all other divisions will wrestle 1-1-1. Overtime will be used if necessary. IHSAA rules with exception of headgear, which is optional.

REGISTERED OFFICIALS WILL BE USED FOR ALL WRESTLING

****A CONCESSION STAND WILL BE AVAILABLE ALL DAY. NO COOLERS IN GYM, PLEASE****

ENTRY POSTMARKED BY JANUARY 22nd TO GUARANTEE SPOT

Name _____ Grade _____ Age _____ Birth Date _____

School/Club _____ Telephone _____

Street Address _____

E-Mail Address _____

City/State _____ ZIP Code _____ Record: WON ____ LOSS ____

I certify _____ is in _____ grade and has my permission to compete in the City High Matpac Wrestling Tournament. I hereby accept full responsibility for his/her behavior and participation. I agree not to hold the Iowa City Community School District and/or the City High Matpac Wrestling Club or its members responsible for injury or accident to my youngster. I understand that neither is carrying medical insurance to cover my child.

Pee Wee Division (Gr. K-2)
your weight _____

Bantam Division (Gr. 3-4)
your weight _____

Junior Division (Gr. 5-6)
your weight _____

Senior Division (Gr. 7-8)
your weight _____

Signed by parent or guardian _____

Make check payable to: City High Matpac Wrestling Club
Mail entry and fee of \$12.00 to: Cory Connell, 1900 Morningside Drive, Iowa City, IA 52245
319-321-9097