



Clay County 15th Annual Danny Suite Memorial Tournament
February 20th, 2022

Place: Clay County High School, 1 Panther drive, Clay, WV 25043
Entry: \$15.00 Team mail ins of ten or more received by 2/17/22
Fee: \$20.00 Mail in received by 2/17/2022
\$25.00 Email, Texts, Call in's (Deadline 2/17/22 by 9:00 p.m.) **NO WALK-INS**

TOURNAMENT WILL BE LIMITED TO THE FIRST 300 ENTRIES!!!

Mail entries to: **Clay Jr. Wrestling** Call Ins: **Malinda Stewart: 304-553-3107 Text**
P.O. Box 452 **only between 8 am and 4 pm**
Clay, WV 25043 **Calls from 4:30 P.M. to 9: 00 P.M.**
(Make checks **Or email: malindaastewart@gmail.com**
payable to CCJW) **TJ Legg: 304-286-5477(home)**
304-651-9426 (cell)
Email: **terry.a.legg@wv.gov**

Weigh Ins: Sunday, February 20th, 2022 – CLAY COUNTY HIGH SCHOOL 6:30 am – 8:00 am

Scratch Meeting to follow. Take Down Tournament will be held during the scratch meeting – 5 take downs will win award. \$5.00 fee to enter.

Rules: Double Elimination. Wrestlers will wrestle three one-minute periods. Scholastic rules apply with sudden death overtime. **LIMIT TWO ENTERIES PER WRESTLER IN DIFFERENT AGE BRACKETS.** We reserve the right to combine weight classes. \$10.00 to move up a weight class. Proof of age "if challenged." Blind draw, every effort will be made to split wrestlers from the same team.

Awards: Individual awards given 1st, 2nd, 3rd, & 4th place finishers in each weight class. Participation awards awarded to all other wrestlers.

BREAKFAST AND LUNCH FOODS WILL BE AVAILABLE

Entry form on back

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WEIGHT CLASSES (Age as of January 1st, 2022! Please circle only one and copy form for a second entry!)

4 & Under	35	40	45	50	HWT	65MAX									
5 & 6	40	45	50	55	60	HWT	75max								
7 & 8	45	50	55	60	65	70	75	85		HWT	120max				
9 & 10	55	60	65	70	75	80	85	90	95	105	125	HWT (160 max)			
11 & 12	65	70	75	80	85	90	95	100	105	115	125	135	145	160	HWT (200 max)
13 & 15	78	84	90	95	102	110	116	123	128	135	145	155	171	190	HWT (285 max)

IF YOU ARE IN HIGH SCHOOL AND 15 AND ARE NOT LISTED ON ANY HIGH SCHOOL WRESTLING ROSTER FOR THE YEAR OF 2021/22 YOU MAY COMPETE.

Name: _____ Phone: _____

Address: _____

Age Group: _____ Weight Class: _____ Birthdate: _____

Coaches Name: _____ Team: _____

Clay county High School, WVYWA and Clay Jr. Wrestling League will not be responsible for any accident or injury that occurs during this event, or property losses. I will be personally responsible for any injury to myself or my wrestler during this event. I have read and fully understand this document. My signature indicates I agree with, and will abide by, its contents.

PARENT
SIGNATURE: _____

DATE: _____