



Novice and Open Divisions

Hosted by Northern Delaware Wrestling Academy

February 8th, 2025

Appoquinimink High School
1080 Bunker Hill Rd
Middletown, DE 19709

All Questions: Jody Wilson
jwilson7283@comcast.net, 302-242-8027

Weigh-ins: Novice Weigh in 7 – 8:00 AM ---- Open Weigh In 12 – 1 PM

Wrestling: Novice begins at 9:00 AM, Open begin at 2 PM

Entry Fee: \$30.00 - Online Registrations

http://www.trackwrestling.com/registration/TW_Register.jsp?tournamentGroupId=251471132

NO ONLINE ENTRIES WILL BE ACCEPTED AFTER Thursday, February 6th – Walk Ins Welcome
Satellite Weigh Ins and Team Registrations and available – email to arrange jwilson7283@comcast.net

- Rules:**
1. National Federation rules will govern tournament
 2. All Divisions will wrestle 1 – 1 – 1 with regular overtime
 3. Headgear and singlet recommended
 4. Director has the right to combine weight classes with less than 3 wrestlers
 5. Division ages are as of Saturday, February 8th, 2025
 6. Wrestlers may compete in more than one division / separate entry form required
 7. NCAA Out of Bounds
 8. Double Elimination

<u>Novice</u> <u>(1st and 2nd year wrestlers ONLY)</u>	Tot 6U – 40, 45, 50, 55, 60, 65, HWT Bantam 8U – 40 45 50 55 60 65 70 75 80 HWT Midget 10U – 50 55 60 65 70 75 80 85 90 95 100 110 120 HWT Junior 12U – 55 60 65 70 75 80 85 90 95 100 105 110 120 130 140 HWT Girls – Will be separated by age and weigh
<u>Open</u>	Tot 6U – 40, 45, 50, 55, 60, 65, HWT Bantam 8U - 40 45 50 55 60 65 70 75 80 HWT Midget 10U - 50 55 60 65 70 75 80 85 90 95 100 110 120 HWT Junior 12U - 55 60 65 70 75 80 85 90 95 100 105 110 120 130 140 HWT Intermediate 14U - 70 75 80 85 90 95 100 105 110 115 120 125 130 140 150 170 HWT Girls – Will be separated by age and weight

Awards: Awards will be provided to the top 3 place finishers in each Division / Wt Class.

Admission: \$5.00 – Per Spectator / Children 10 & Under are free **** Breakfast, Lunch & Refreshments Available ****

Make checks payable: Compete Event Management

Mail fee & registration to: Compete, 396 N School Lane Smyrna, DE 19977

DETACH & RETURN THIS PORTION *PLEASE PRINT* DETACH & RETURN THIS PORTION

DIVISION _____ WEIGHT CLASS _____

Name _____ Age _____ Birthdate _____ Grade _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Team _____ 2023-2024 Record -- W _____ L _____

Honors _____

Parent Signature _____ Wrestler's Signature _____ Date _____