

NEW YEAR'S BRAWL

Date: Sunday, December 28th, 2025

Location: Smyrna High School, Smyrna, DE 19977

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

Weigh-ins: Sunday, December 28th 7:00 am - 8:30am · Satellite Weigh Ins available, contact Jody Wilson

Wrestling will begin promptly at 9:30 am on 5+ mats

Entry Fee: \$40.00 – Mail-in registrations must be received NO LATER than Friday, December 26th

\$42.00 - Online Registrations http://www.trackwrestling.com/registration/TW_Register.jsp?tournamentGroupId=268896132

Entries will be accepted until Friday Dec 26th at 7 PM EST

- Rules:**
1. National Federation rules will govern tournament
 2. All periods will be 1 – 1 – 1.
 3. Headgear and singlet recommended, not required
 4. Proof of age must be available, if challenged
 5. Director has the right to combine weight classes with less than 3 wrestlers
 6. Division ages are as of Sunday, December 28th, 2025
 7. Wrestlers may compete in more than one division / separate entry form required (Must be ready to wrestle when called upon)

DIVISIONS AND WEIGHT CLASSES

***** Double Elimination *****

Tot (Ages 6 & Under)	42 47 52 57 62 HWT (max is 85)
Bantam (Ages 7 - 8)	47 52 57 62 67 72 77 92 HWT (max is 115)
Midget (Ages 9 - 10)	57 62 67 72 77 82 87 92 102 HWT (max is 130)
Junior (Ages 11 - 12)	67 72 77 82 87 93 100 107 117 130 145 HWT (max is 185)
Intermediate (Ages 13 - 14)	77 84 91 98 105 112 119 126 133 140 148 158 170 HWT (max is 250)
Girls	Madison System

Awards: Awards to top 3 finishers in each weight class

Admission: \$5.00 – Per person

Make checks payable: Compete

Mail fee & registration to: Jody Wilson, 396 N School Lane, Smyrna, DE 19977 **Questions:** jwilson7283@comcast.net

PLEASE PRINT

DETACH & RETURN THIS PORTION

DIVISION _____ **WEIGHT CLASS** _____

Name _____ **Age** _____ **Birthdate** _____ **Grade** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Phone # _____ **Team** _____ **2024-2025 Record -- W** _____ **L** _____

Honors _____

In consideration of your acceptance of my entry, I hereby release Compete Event Management, Smyrna High School, and all sponsoring bodies, their officers, and tournament officials from all liabilities, claims, or rights to damage for injuries suffered by my child directly or indirectly in training for, traveling to and from, and participating in the New Year's Brawl Wrestling Tournament.

Parent Signature _____ **Wrestler's Signature** _____ **Date** _____