

***BECOME AN AAU ALL AMERICAN at the  
AAU Spring Youth Nationals:  
Wrestling Tournament  
March 28-29, 2008***



**Site:** **Location:** Knoxville, Tennessee

**Event Site:** The Jacob's Building Convention Center  
Chilhowee Park. *More room, including upstairs  
viewing, than last years site!*

**Directions:** The Jacob Building is located in Chilhowee Park near the  
Knoxville Zoo. Take Exit 392 from Interstate 40,  
following the signs to the Knoxville Zoo.

**This is a Youth Folkstyle Event**

**AGE / WEIGHT CLASSES**

**Tots** - Born 2002 or after

Weights - 40, 45, 50, 55 & Hwt.

**Bantam** - Born in 2000 or 2001

Weights - 40, 45, 50, 55, 60, 65, 70, 75, 80, 90 & Hwt.

**Midget** - Born in 1998 or 1999

Weights - 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 103, 112, 120, 130 & Hwt.

**Novice** - Born in 1996 or 1997

Weights - 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 112, 120, 130, 140 & Hwt.

**SchoolBoy (PLUS)** - through the 8<sup>th</sup> grade and Born in 1993, 1994 or 1995

Weights - 70, 75, 80, 85, 90, 95, 100, 105, 110, 115, 120, 125, 130, 140, 150, 160, 180, and  
Hwt.

\*Born in 1993 Added to SchoolBoy Division to allow older 8<sup>th</sup> graders to participate in this event\*\*\*

**Schedule:**

**Friday, March 28**

4-8 PM Weigh-ins for all Divisions

\*Weigh-ins will take place at the Jacob's Building Convention Center.

**Wrestlers must weigh-in wearing a singlet and will be given a 2 LB allowance.**

**Saturday, March 29**

8 AM

Doors Open for Wrestlers and Spectators

9 AM

Wrestling begins

## Tournament Format

1. Bracket Style with Round Robins for Divisions with fewer than 5 wrestlers
2. Match Duration:
  - Tot thru Novice 3 – 1 ½ minute periods.
  - Schoolboy 3 – 2 minute periods
3. Consolations: 3<sup>rd</sup>, 5<sup>th</sup> & 7<sup>th</sup> Place matches
  - Tot, Bantam, Midget, and Novice will wrestle three 1 minute periods.
  - Schoolboy will wrestle three periods; 2, 1 and 1 minutes.
4. All pairings are made via blind draw. No seeding will be used. States will be separated.

**ALL-AMERICAN AWARD: all wrestlers placing 1<sup>st</sup> – 3<sup>rd</sup> will be named a 2007 AAU All-American!**

**Medals:** *1<sup>st</sup> through 8th place finishers in each division.*

### Pre-Registration Only:

**WRESTLERS MUST PRE-REGISTER TO WRESTLE IN THIS EVENT  
ENTRIES MUST BE RECEIVED BY 9 PM, Monday, MARCH 26<sup>TH</sup>.  
TOURNAMENT ENTRY IS LIMITED TO 500 WRESTLERS.**

**WE WILL CONFIRM ENTRY VIA E-MAIL, SO PLEASE INCLUDE YOUR EMAIL ADDRESS.**

*Each entry must include: copy of birth certificate,  
Copy of AAU Card, and an Official School  
Document verifying wrestlers grade in school.*

**Registration Cost:** Entry Fee is \$40.00 *plus current AAU membership card is required.*  
No Personal/Club Checks. Cash, Cashiers Check or Money order only.  
(please do not mail cash and no refunds will be given.)

**Make payable to:  
TEAM TENNESSEE WRESTLING.  
134 Vanderview Drive  
Seymour, TN 37865**

**Coaches Registration:** \$25.00 cashiers check/money order/ or cash at the Registration Table.  
Packet includes: **Floor Pass, Admission Ticket, Hospitality Pass,  
Tournament Rules/Procedures Packet, and Tournament T-Shirt**  
(all coaches must have a **valid AAU Coaches Card** and a **Floor Pass** in order to  
coach in this event.)

**Admission:**

Adults	\$10.00
Children under 12	\$ 5.00
Children under 2	Free

- Bleacher seating available, but you may bring your own folding chair. This years venue, also has an upstairs viewing option.
- No Coolers allowed in arena.
- Concessions will be available the entire day! We Promise!!

**T-Shirts** Each Wrestler will receive an AAU NATIONALS Tournament T-shirt.

**Purchasing an AAU Card:** go to [www.aausports.org](http://www.aausports.org) and click on the Membership Button.

**Contact:** If you have any questions or simply need more information concerning this event, please contact:  
Darrel Lauderdale at  
[seauwrestling@chartertn.net](mailto:seauwrestling@chartertn.net) or at [darrelllauderdale@sevier.org](mailto:darrelllauderdale@sevier.org)

# AAU Spring Youth Nationals Wrestler and Coaches Entry Sheet

PLEASE PRINT CLEARLY!

Division: \_\_\_\_\_ Weight Class: \_\_\_\_\_ Entry Fee: \$40.00

Wrestlers Name: \_\_\_\_\_

AAU Card Number: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Parents Name: \_\_\_\_\_

## Coaches Registration Coaches Fee: \$25.00

Coaches Name: \_\_\_\_\_

Coaches AAU Card Number: \_\_\_\_\_  
(Please include a copy of your AAU Coaches Card)

- All entries received without the entry fee included will be discarded.
- Entry fee must be in the form of a Cashiers Check or Money Order and made out to: TNAAU Wrestling.
- Mail your entry to:  
134 Vanderview Drive  
Seymour, TN 37865
- Please include proof of age, ie: a copy of your birth certificate or an official government document with your entry form and fee.
- **Please include the signed Athlete Waiver/Release Form.**
- Weight Class must be declared on the entry forms. Weight Change Deadline will be March 26<sup>th</sup>.
- A wrestler who fails to make weight, can pay a Change of Weight Class fee of \$10 and move up to the next weight class if there is bracket space available. No wrestlers will be allowed to move down a weight class.
- **All wrestlers must wear a Singlet, Wrestling Shoes, and a Headgear during competition.**
- **Brackets will be posted as soon as possible following the conclusion of weigh-ins. Coaches need to check their wrestlers weight class to make sure your wrestler is in the right bracket.**
- No more than 2 coaches in a corner.

## **ATHLETE WAIVER/RELEASE FORM ("AGREEMENT")**

IN CONSIDERATION of my/the minor's participation in any way in any Amateur Athletic Union of the U.S., Inc. ("AAU"), activity

("ACTIVITY") I, for myself, the minor, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am/ the minor is qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I/ the minor will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own/ the minor's actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur/ the minor incurs as a result of my/the minor's participation in the Activity.

3. HEREBY RELEASE, AND FOREVER DISCHARGE, AND COVENANT NOT TO SUE the Amateur Athletic Union of the U.S. Inc. ("AAU"), the Host, Local Organizing Entity, as well as the officers, directors, agents, attorneys, employees, representatives, successors and assigns of each of the foregoing entities, and the AAU's Associations, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by the AAU, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY/THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION OR NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING, BUT NOT LIMITED TO NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my/the minor's behalf, makes a claim against any of the Releases, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. I ACKNOWLEDGE THAT THE TIMES (SCHEDULE) FOR EVENTS MAY CHANGE. I, or we, grant to the Directors, Assistants, or assigned chaperons of this event to act as guardians/spokesman in granting permission for emergency treatment/hospitalization (including anesthesia) if believed necessary for the minor en route to or from or at the site of AAU event or hospital or other medical facility. I understand that should a health emergency arise, such parties will attempt to notify me, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I hereby authorize the AAU to allow the reproduction, dissemination, and/or publication of my / the minor's name and/or likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording and understand that the AAU retains title, exclusive and unlimited rights to all internet streaming files including live and archived games, interviews, and events broadcast to the Internet. This is to be done in conjunction with my/the minor's participation in this AAU event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my/the minor's participation in this event, nor will I/the minor receive any payment for the possible commercial use of my/the minor's name or likeness. **INSURANCE:** Excess medical insurance is provided for any member athlete participating in an AAU-sanctioned practice or event. If such athlete has other medical coverage, theirs will be applied first, followed by this excess coverage. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. MINOR RELEASE; AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY-AS IS, WITHOUT MODIFICATION, ACCOMMODATION, OR SPECIAL PERSONNEL (AND THAT IF NOT, I WILL PAY ALL EXPENSES RELATED THERETO). I HEREBY RELEASE, FOREVER DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR

DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION AND/OR NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION AND/OR ARBITRATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGES, OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

This Agreement shall be governed by the laws of the State of Florida , and **the Parties agree that any legal action relating to or arising out of this Agreement shall be brought exclusively in binding Arbitration in Orange County, Florida**, through AAA Arbitration or other Arbiter approved by AAU, and subject to the Rules of AAA or the applicable Arbiter, and applicable Florida law.

**PRINTED NAME OF PARTICIPANT: PHONE:** \_\_\_\_\_

**PARTICIPANT'S SIGNATURE (only if age 18 or over): DATE:**

**PRINTED NAME OF PARENT/GUARDIAN:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_  
(Street) (City) (State) (Zip)

**PHONE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE:** \_\_\_\_\_