



MIDDLE ATLANTIC WRESTLING ASSOCIATION

FLOWRESTLING
OFFICIAL LIVE STREAM PARTNER

Preliminary District Tournament

Tournament Director : Jordan Glenn Phone: 607-343-6391
Tournament Location: Johnson City Middle School
Tournament Address: 601 Columbia Drive, Johnson City, NY 13790
DATE: March 8, 2025
TIME: 9:30 am
WEIGH-INS: March 7: 6 pm to 8 pm and March 8: 6:30 am to 7:30 am

MUST BE IN A SINGLET OR 2 PIECE WRESTLING UNIFORM

COMPETITORS SHOULD SELECT A WEIGHT THEY CAN HOLD FOR THE REGIONALS AND EASTERN NATIONALS

WEIGHT CLASSES AND AGES:

Bantam Division: (Born in 2017 and after)

Weights: 40, 44, 48, 52, 56, 60, 65, 73, 93 MAX.

Midget Division: (Born in 2015 and 2016)

Weights: 50, 54, 58, 62, 66, 70, 75, 80, 85, 93, 105, 134 MAX.

Junior Division: (Born in 2013 and 2014)

Weights: 58, 62, 66, 70, 74, 78, 82, 86, 91, 98, 108, 120, 140, 166 MAX.

Intermediate Division: (Born in 2011 and 2012)

Weights: 75, 80, 85, 90, 95, 100, 105, 110, 115, 120, 128, 136, 150, 175, 220 MAX.

Advanced Division: (Born in 2009 and 2010)

Weights: 93, 100, 105, 110, 115, 120, 125, 130, 135, 140, 145, 152, 160, 171, 189, 220, 285 MAX.

Elite Division: (Born in 2007 and 2008)

Weights: 111, 118, 125, 130, 135, 140, 145, 152, 160, 171, 189, 220, 285 MAX.

Open Division: Born before 2007

Weights: 125, 135, 142, 150, 158, 167, 177, 190, 220, 295 MAX.

EVERYONE MUST COMPETE IN THEIR OWN AGE DIVISION EXCEPT those who exceed the MAXIMUM weight.

LENGTH OF BOUTS: Intermediate, Advanced, Elite, & Open: Three 1 1/2 minute periods; All Others three 1 minute periods; Overtime-Sudden Death: One- 1 minute period followed by a 30 second ride out period if necessary.

WRESTLING RULES: NY Modified rules; NY officials will be used. **EVERYONE** must have **PROOF OF AGE** if challenged; **INCLUDING** the **PERSON ISSUING** the challenge. **IMPORTANT:** Once you have qualified for the **REGIONAL TOURNAMENT** you **MAY NOT** enter another **DISTRICT TOURNAMENT**. **ANYONE WHO DOES WILL BE DISQUALIFIED FROM ADVANCING TO THE REGIONAL TOURNAMENT.** Any entrant who falsifies information on an application to enter a District or Regional MAWA Tournament will be subject to a one-year suspension from the program, effective immediately upon discovery.

AWARDS: Medals will be given to the top FOUR finishers in each weight class.

UNIFORMS: One-piece singlet or two piece wrestling uniform are **REQUIRED**.

ENTRY FEE: \$40.00 **MUST ACCOMPANY THIS APPLICATION**

DEADLINE FOR EARLY ENTRIES: 02/28/2025 Late Entry Fee will be \$45.00. **DO NOT** mail your application after 02/28/2025. Bring it with you.

SPECTATOR ADMISSION: Adults: \$5.00 and Students \$3.00 per day.

*** HOT FOOD AND SNACKS WILL BE AVAILABLE ALL DAY ***

The top **FOUR** place winners in this tournament will advance to the **NORTH** Regional Tournament to be held on Saturday, April 26 & Sunday April 27 at the Bloomsburg Fairgrounds in Bloomsburg, PA including Open Division. There will be a **\$30 Cash** advancement fee to be collected at the District Tournament. **The advancement fee is expected to be paid before leaving the District Tournament.** A 1 lb. weight allowance will be given at the Regional Tournament.

The top **FOUR** place winners in the Regional Tournament advance to the Middle Atlantic Wrestling Association's Eastern National Championships on May 3 – May 4 at Wicomico Civic Center, Salisbury, MD including Open Division. There will be a **\$30 Cash or \$32 Card** advancement fee to be collected at the Regional Tournament. **The advancement fee is expected to be paid before leaving the Regional Tournament.** Fifth and sixth places are alternates. An additional 1 lb. weight allowance (2 lb. total) will be given at the Eastern National Championships.



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Visit www.mawawrestling.com for the latest schedule.

DIVISION _____ WEIGHT CLASS _____ **You MAY change weights at weigh-ins**

WRESTLER'S NAME _____ CELL (____) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____ DOB _____

mm/dd/yyyy

24/25 SEASON HONORS _____

NAME OF SCHOOL DISTRICT OR COLLEGE _____

I hereby give this child permission to wrestle in the 2025 Middle Atlantic Wrestling Association Championships and release all sponsoring bodies, their officers, tournament officials, committees and referees from all liability. Furthermore, I agree that both myself and my child's coach will be held responsible for our own and the wrestler's conduct while attending this event. I am also aware that verbal and physical child abuse or neglect will or may be reported to proper authorities if witnessed by tournament officials and could lead to disqualification of the wrestler and possible lawful investigation beyond our borders.

PARENT'S SIGNATURE (<18) _____

CONTESTANT'S SIGNATURE (>18) _____

Return entry form with \$40.00

Mail application and entry fee to: Tina Atkinson, 92 Virginia Avenue, Johnson City, NY 13790

Make checks payable to: Johnson City Recreational Wrestling Club

DEADLINE FOR EARLY ENTRIES: 02/28/2025