



2017 Blue Demon Fall-Brawl



Saturday, October 14th, 2017

Christiansburg High School
100 Independence Blvd
Christiansburg, VA 24073

Registration: Deadline for mail in registration October 12th. Register on trackwrestling or walk-in on Saturday. Online pre-registration is preferred method of entry.

Schedule: Weigh ins for K-2 and 3-5 divisions will be 7:00-8:00AM. Wrestling will begin at 9:00 AM
Weigh ins for 6-8/MS and 9-12HS divisions will be 7:00-12:00PM. Wrestling will begin at 1:00.

Format: Folkstyle - Brackets – Round Robin to be determined.

Awards: Medals to top three in each weight class

Cost: Entry fee: \$20.00 for advance registration, \$25.00 for walk ins. (Additional weight class/age division \$10.00) **Please register early! No USA Card or AAU Card required.**

Spectator Admission: \$3.00 Concessions will be available.

Contact Info: Cliff Warden (Cwarden@bluedemonwrestling.com) cell: 304 890-4854
Luke Brugh (brugh.luke@gmail.com) Phone: 540-320-9352

**If not registering online, make checks payable to CBDWC – Mail check and information below to:
407 Roanoke St. Christiansburg, VA 24073. Must be received by October 12, 2017.**

Age Divisions and weight classes:

- K-2 40, 45, 50, 55, 60, 65, 70, HWT
- 3-5 60, 65, 70, 75, 80, 87, 94, 100, 110, 120, 130, HWT
- 6-8MS 78, 84, 90, 95, 102, 110, 116, 123, 128, 135, 145, 155, 171, 190, HWT
- 9-12HS 106, 113, 120, 126, 132, 138, 145, 152, 160, 170, 182, 195, 220, HWT

Our goal is to get each wrestler 3-5 matches. To do so we may use the Madison System or combine weight classes.

Upon consideration and acceptance of _____ (wrestlers name), as a Participant in the Blue Demon Fall Brawl, I hereby waive any and all claims against the Christiansburg Blue Demon Wrestling Club and any other individuals or groups associated with the event that may occur from injury of the above named wrestler, resulting directly or indirectly from his/her participation in the Blue Demon Fall Brawl. I further acknowledge the inherent risk in the sport of wrestling and assume all such risks.

Wrestler Name:		Email Address:	
Address:			
Phone:		School/Club:	
Age:		Grade:	Weight:
Parent/Guardian Signature:			
Date:			