

**AAU WRESTLING ELEMENTARY DUALS**  
**April 16-18, 2010**  
**INTENT TO PARTICIPATE**  
**PLEASE MAIL OR FAX THIS BACK IMMEDIATELY UPON RECEIPT**  
**TO RESERVE YOUR SPOT.**

THIS IS NOT YOUR TEAM ENTRY. THIS IS ONLY A NOTIFICATION OF YOUR INTENT TO PARTICIPATE TO ASSIST ORGANIZERS IN THE PLANNING PROCESS. YOUR ENTRY IN THE EVENT WILL NOT BE GUARANTEED UNTIL ALL ENTRY FORMS AND FEES ARE SUBMITTED.

- CHECK ONE:        Our team will participate in this event.
- Our team can not participate this year, but please keep us on your mailing list for next year.

**UPON RECEIPT PLEASE COMPLETE THE INFORMATION BELOW AND SUBMIT.**

AAU District: \_\_\_\_\_

Team Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

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

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address (**MANDATORY**) \_\_\_\_\_

Travel Coordinator(if different): \_\_\_\_\_

Email(Mandatory) : \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Hotel(if booked): \_\_\_\_\_

**RETURN THIS FORM VIA FAX OR EMAIL TO:**

**Frank Lett**  
**Kingsport Convention & Visitors Bureau**  
**423-392-8833 (Fax)**  
[frank@visitkingsport.com](mailto:frank@visitkingsport.com)

**REMEMBER, THE ENTRY DEADLINE FOR ALL ENTRY MATERIALS TO BE RECEIVED IN KINGSPORT IS FRIDAY, APRIL 2, 2010!**

**AAU Wrestling Elementary Duals Entry Form**  
**April 16-18, 2010**

**Instructions to Enter**

**Enclosed you will find the following entry materials for the 2010 AAU Wrestling Elementary Duals. If you are missing any of the following items please contact:**

**Frank Lett at 423-392-8831 or [frank@visitkingsport.com](mailto:frank@visitkingsport.com)**

- 1. Intent to participate (return today)**
- 2. Instructions to Enter**
- 3. Tournament Information**
- 4. Team Roster**
- 5. Entry Form**

**It is important to have all information completely filled out. All items must be received no later than Friday, April 2, 2010.**

**Send the following items:**

- 1. Entry Fee of \$650.00 NON-REFUNDABLE, no Personal Checks will be accepted.**
- 2. Completed Team Roster**
- 3. Completed Entry Forms**

**Please submit by trackable delivery:**

**Kingsport CVB  
AAU Wrestling  
151 East Main Street  
Kingsport, TN 37660  
423-392-8831**

# AAU Wrestling Elementary Duals

## April 16-18, 2010

### Tournament Information

- DATES:** April 16-18, 2010
- SITE:** *Dobyns-Bennett High School*  
1800 Legion Drive, Kingsport, TN 37664
- HOST:** Kingsport Convention & Visitors Bureau
- ENTRY FEE:** \$650.00, **NON-REFUNDABLE. NO PERSONAL CHECKS.**  
Entry fee includes admission for members of the official roster submitted for this event.  
(maximum of 3 coaches and 1 table worker)  
For more information contact Frank Lett at (423) 392-8831 or by e-mail at [flett@visitkingsport.com](mailto:flett@visitkingsport.com)
- ENTRY DEADLINE:** All entries **MUST BE RECEIVED BY FRIDAY, April 2, 2010.**
- ACCOMMODATIONS:** Hotel and travel information can be obtained by visiting our website [www.visitkingsport.com](http://www.visitkingsport.com) or by contacting Lara Moore at 423-392-8821, or [lmoore@visitkingsport.com](mailto:lmoore@visitkingsport.com).
- MEMBERSHIP:** All team members, coaches, tableworkers and clubs must hold current AAU memberships prior to registration. For membership go to [www.aausports.org](http://www.aausports.org)
- WEIGH-INS & REGISTRATION:** Weigh-ins and registration will take place between 11:00 am and 3:00 pm on Friday April 16, 2010 at *Kingsport Civic Auditorium*, 1550 Ft. Henry Drive, Kingsport, TN 37664, located in the parking lot of *Dobyns-Bennett High School*. Weigh-ins will be administered by team. Each team will need to arrive together for weigh-ins. **WEIGH-INS WILL BE DONE WITH EACH ATHLETE WEARING A SINGLET.**
- PARKING:** Parking is complimentary at *Dobyns-Bennett High School*.
- ADMISSION:** Admission to the event will be \$10 per day or \$20 for the length of the event.
- COOLERS:** **NO COOLERS WILL BE ALLOWED IN THE FACILITY!! Water will be provided to athletes and coaches.**
- COACH'S MEETING:** The coach's meeting will be held at Dobyns-Bennett High School at 4:45 pm on Friday April 16.
- COMPETITION:** Opening ceremonies will be held at 6:00 pm on Friday April 3, competition will begin following opening ceremonies. Competition will begin on Saturday and Sunday mornings at 9:00 am.
- ALTERNATES:** There will be a mat dedicated to alternate matches only. Alternate matches will be scheduled by weight class.

**RULES:**

Rules will be according to the AAU Wrestling Handbook, the AAU National Codebook and the National High School Rulebook. **Each team/club will be permitted to have up to 3 members of their team that meet the AAU cross-boundary rule. Meaning that each team may have up to 3 members of their team/club that reside in geographically adjoining districts to the team/club district of registration.**

Competitors must have been born in 1998 or after, **AND** be enrolled in elementary school, kindergarten through 5<sup>th</sup> Grade. Each Participant should bring proof of age and grade with them to the event.

The weight classes for the event will be: 40, 45, 50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 108, 116, 125, 135, 148, and HWT up to 230 lbs.

A team shall consist of up to: 19 weight classes, 6 alternates, and 1 table worker.

**EACH TEAM WILL BE RESPONSIBLE TO PROVIDE ONE TIMER OR ONE SCORER FOR EACH OF THEIR TEAM'S DUAL MEETS.**

For competition in the final pools, if two teams have wrestled one another earlier in the tournament, the team that lost the dual may decide not to wrestle the match again without penalty. To exercise this right, the head table must be informed of a team's intention not to wrestle when the final schedule is posted.

**AMONG THOSE TIED, CRITERIA IN CASE OF TWO OR MORE TEAMS ENDING WITH IDENTICAL RECORDS:**

**(in a situation of a three way tie, once the three way tie is broken to two teams revert to the following process beginning with head-to-head.)**

1. Head-to-head competition
2. Penalized the least for Flagrant or Unsportsmanlike conduct
3. Greatest number of team points
4. Greatest number of individual wins
5. Greatest number of falls
6. Greatest number of technical falls
7. Greatest number of major decisions
8. Greatest number of offensive points scored by all athletes during the head-to-head competition

**TIE BREAKERS FOR ALL DUAL MEETS AMONG THOSE TIED:**

1. The team who has been penalized the least for Flagrant or Unsportsmanlike conduct
2. The team with the least number of team points penalized by team and personnel wins
3. The team with the least number of match points penalized for unsportsmanlike wins
4. The team having won the greater number of matches including forfeit wins
5. The team having won the greater number of falls, defaults, forfeits and disqualifications
6. The team having the greater number of technical falls
7. The team having the greater number of major decisions
8. The team having the greater number of (total match points) of first-point(s) scored
9. The team having the greater number of points for near-falls
10. The team having the greater number of takedowns
11. The team having the greater number of reversals
12. The team having the greater number of escapes
13. The team who was penalized the least number of points for stalling
14. The team who has been warned the least number of times for stalling
15. The team who has been penalized the least number of points for other infractions
16. Coin Toss

**MEDALS AND AWARDS:**

AAU Championship Medals will be awarded to the top eight teams and those individuals who have wrestled a minimum of five matches and have 3 losses or less. Also, the 1<sup>st</sup> and 2<sup>nd</sup> place teams in each consolation bracket will receive awards.

**FOR MORE INFORMATION:**

Contact Frank Lett 423-392-8831 or by email at: [frank@visitkingsport.com](mailto:frank@visitkingsport.com)

# 2010 AAU WRESTLING ELEMENTARY NATIONAL DUALS

## National Entry Form

PLEASE PRINT CLEARLY

TEAM NAME: \_\_\_\_\_

CLUB NUMBER: \_\_\_\_\_

AAU DISTRICT: \_\_\_\_\_

### HEAD COACH

NAME				
EMAIL				
ADDRESS	Street:	City:	State:	Zip:
Phone #	Home:	Cell:		

### ASSISTANT COACH

NAME				
EMAIL				
ADDRESS	Street:	City:	State:	Zip:
Phone #	Home:	Cell:		

### ASSISTANT COACH

NAME				
EMAIL				
ADDRESS	Street:	City:	State:	Zip:
Phone #	Home:	Cell:		

Must be signed by Head Coach:

I certify that all of the information submitted on roster is correct and that each athlete meets all eligibility requirements. I certify that I know and understand the rules, policies, and code of conduct for my sport. I have read the rules, statement of policy and ethics, and I agree to require my athletes and assistant coaches to abide by them.

Coach's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

