AAU WRESTLING ELEMENTARY DUALS April 10-12, 2015

INTENT TO PARTICIPATE

PLEASE EMAIL 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 T	HE INFORM	IATION BELOW A	ND SUBMIT.	
AAU District:						
Team Name:						
Contact Person:						
Address:						
City:			State:	Zip:		
Home Phone:		Cell Phone:		WorkPhone:		
Email Address (MAND	ATORY)					
Travel Coordinator(if di	ifferent):					
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

AAU Wrestling Elementary Duals Entry FormApril 10-12, 2015

Instructions to Enter

Enclosed you will find the following entry packet for the 2015 AAU Wrestling Elementary Duals. If you have any questions please contact:

Frank Lett at 423-392-8831 or frank@visitkingsport.com

It is important that all entry fees are received by no later than <u>Friday</u>, <u>March 27th</u>, <u>2015</u>

Send the following items:

- 1. Entry Fee of \$650.00 NON-REFUNDABLE, no Personal Checks will be accepted.
- 2. Completed Entry Form

All roster information must be submitted online through Track Wrestling, at trackwrestling.com

Please submit payment and entry form by trackable delivery:

Kingsport CVB

AAU Wrestling

400 Clinchfield Street, Suite 100

Kingsport, TN 37660 423-392-8831

AAU Wrestling Elementary Duals Tournament Information

DATES: April 10-12, 2015

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

ENTRY DEADLINE: All entries MUST BE RECEIVED BY FRIDAY, March 27, 2015.

ACCOMMODATIONS: Hotel and travel information can be obtained by visiting our website www.visitkingsport.com or

by contacting Lara Moore at 423-392-8821, or 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

MANDATORY COACHES

EDUCATION: The AAU National Office is happy to announce to its members, FREE Coaches' Education for all

AAU Non-Athletes. This exciting program is **MANDATORY** for all AAU Non-Athletes and will be administered by **Positive Coaching Alliance** (**PCA**). Please visit <u>www.aausports.org</u> and click on JOIN NOW in order to enter and take the MANDATORY AAU/PCA coaches educational course. Membership may be revoked from non-athletes who do not complete course prior to

competition.

WEIGH-INS &

REGISTRATION: Weigh-ins and registration will take place between 10:00 am and 1:00 pm on Friday **April 10**,

2015 at *MEADOWVIEW MARRIOTT CONVENTION CENTER*, 1901 Meadowview Parkway, Kingsport, TN 37660, Weigh-ins will be in the convention center and 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

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 FACILTY!! Water will be provided to

athletes and coaches.

COACH'S

MEETING: The coach's meeting will be held at Dobyns-Bennett High School at 4:00 pm on Friday April 10.

COMPETITION: Opening ceremonies will be held at 5:00 pm on Friday April 10th, competition will begin following

opening ceremonies. Competition will begin on Saturday and Sunday mornings at 9:00 am.

ALTERNATES: We will do our best to accommodate alternate matches. There will be a mat time dedicated to

alternate matches only. Alternate matches will be scheduled by weight class. Alternate matches

will not count toward medal or team points!

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 2003 or after, <u>AND</u> be enrolled in elementary school, kindergarten through 5th 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, 140, 170, and HWT up to 220 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 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. A starting weight will be drawn for bracket matches.

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 1st and 2nd place teams in each consolation bracket will receive awards.

Alternate matches will not count toward medal or team points!

FOR MORE:

INFORMATION: Contact Frank Lett 423-392-8831 or by email at: frank@visitkingsport.com

2015 AAU WRESTLING ELEMENTARY NATIONAL DUALS

National Entry Form PLEASE PRINT CLEARLY

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TEAM NAME:									
CLUB NUMBER:									
AAU DISTRICT:									
HEAD COACH									
NAME									
EMAIL									
ADDRESS	Street:	City:		State:	Zip:				
Phone #	Home:		Cell:						
ASSISTANT C	OACH		I						
NAME									
EMAIL									
ADDRESS	Street:	City:		State:	Zip:				
Phone #	Home:	l	Cell:	-1					
ASSISTANT C	OACH		1						
NAME									
EMAIL									
ADDRESS	Street:	City:		State:	Zip:				
Phone #	Home:		Cell:						
I certify that all	by Head Coach: of the information submitt								
I certify that all	·								

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:	