



# 2018 PEEWEE HUNGER GAMES

SPONSORED BY

**WILLIAMS TRAINING ACADEMY**

**SUNDAY,  
JANUARY 21, 2018**

**Liberty High School  
1400 S. Dubuque St  
North Liberty, IA 52317**

**NOTE NEW  
LOCATION!**

**Tournament Director: Joe Williams  
(815) 978-7636  
joe@williamstrainingacademy.com**

**BRACKETS:** 3-4 Round Robin, each wrestler will have 2-3 matches  
**WEIGH-INS:** Sunday, January 21, 2018 7:00-8:00am  
**AWARDS:** 1st Place Trophies & Wooden Brackets, Other Places Medals  
**DIVISIONS:** PreK, K, 1st Grade & 2nd Grade  
**ENTRY FEE:** \$20 Pre-Register (Postmarked or paid online by January 18, 2018)/\$25 Walk-Ins

Mail Checks to :  
**Williams Training Academy  
PO Box 851  
North Liberty, IA 52317**



Or register online at: <http://www.williamstrainingacademy.com>

*45 minute Coaching Clinic begins at 8:00am & wrestling will begin promptly at 9:00am. Unique tournament format will include a grand march & 15 second coaching breaks between periods to allow for athlete development.*

**Be sure to register for the team competition- Cash Prizes & Trophies for top 3 teams!**

**Cut and Mail- PLEASE PRINT LEGIBLY AND COMPLETE ALL INFORMATION:**

I certify that (Athlete Name) \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Grade \_\_\_\_\_ Age \_\_\_\_\_ Weight \_\_\_\_\_ Birthdate \_\_\_\_\_ Record \_\_\_\_\_  
Club \_\_\_\_\_ Years Wrestling \_\_\_\_\_ Email \_\_\_\_\_  
Parent's Name: \_\_\_\_\_ Parent's Contact Number: \_\_\_\_\_  
Parent's Name: \_\_\_\_\_ Parent's Contact Number: \_\_\_\_\_

*The above stated athlete has my permission to compete in the PeeWee Hunger Games Wrestling Tournament. I hereby accept full responsibility for his/her behavior & for his/her participation. I waive all claims for damages, loss or injury. I understand that Liberty High School or Williams Training Academy cannot be held responsible for lost items or liable for accidents. Any damage to property will be billed at the rate deemed appropriate by the school district. All wrestlers should have an AAU or USA card and are responsible for their own insurance.*

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Please Pre-Order Tournament T-Shirt—\$10 Each (\$5 savings) (YS, YM, YL, YXL, AS, AM, AL, AXL, AXXL)**

**Size(s) & Quantity** \_\_\_\_\_ **T-Shirt \$ Due:** \_\_\_\_\_

Are you interested in:  Hosting Club Camps?  Participating in Summer Camps?  
 Private Lessons?  WTA Newsletter?