



2009 NATIONAL COLLEGIATE WOMENS WRESTLING CHAMPIONSHIPS -- ENTRY FORM



Please Print Clearly in Black Ink

(Your Name as you want it to appear on the Brackets)

Name: _____ Weight Class: _____

School: _____ My Age as of 3/14/09: _____

Conference: (circle) North Central Northeast Mid-Atlantic Southeast Southwest West Coast Northwest

My Email Address: _____ My Phone: (____) _____

My Current Class in College: (circle one) Frosh Soph Junior Senior Graduate

-- Entry fee for the Nationals is \$35.00/entrant -- Non-Refundable.

-- Application may be revoked / withdrawn, without competition penalty, no later than
5:00 PM - Eastern Time - Wednesday (3/4/09) by contacting the
Executive Director - Jim Giunta - by email (jim@ncwa.net).

**Entry Fee will be collected at the tournament site prior to competition
Make any checks payable to: NCWA**

Cash \$ _____ Personal Check # _____ School Check # _____

Payment Received by: _____

My Previous NCWA National Championship Placement and Weight Classes:

2008: _____ @ _____

My Current College Records:

For 2008-09 season, my Win / Loss Record at all weight classes is: _____

My Career Collegiate Win / Loss Record at all weight classes is: _____

Please be sure to update your records on the NCWA website before 3/2/09.

"I do hereby submit my name and entry fee for the 2009 National Collegiate Womens Wrestling Championships being held in Hampton, Virginia at the University of Hampton - Convocation Center and I will be present for competition at the stated times and dates."

"All video footage and photos of the National Collegiate Wrestling Championships generated by the NCWA become the sole property of the NCWA and I hereby grant permission to the NCWA to use the video and/or photographic images in any way the NCWA deems appropriate."

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Wrestler's Signature: _____ Date: _____

This Application must be submitted by email to the NCWA at

jim@ncwa.net

Deadline for submitting Entry is March 1, 2009

Also, bring this application with you to the Tournament Registration