



2008 IOLANI INVITATIONAL GIRLS WRESTLING TOURNAMENT

- When: Monday and Tuesday, December 29-30, 2008
- Where: **Iolani School**
563 Kamoku Street
Honolulu, Hawaii 96826
- Contact person: Carl Schroers
Athletic Director
Iolani School
Work Phone -- (808)943-2208
Cell Phone -- (808)779-0895
Fax -- (808)943-2399
Email -- schroers@iolani.org
- Format: Eight team dual meet format. Every team is guaranteed a minimum of four dual meets with a maximum of eight dual meets.
- Entry Fee: \$175.00 per team, due Friday, October 10, 2008 along with the entry form/contract
- Entries: **Teams must indicate their interest in participating by email (schroers@iolani.org) by Friday, January 25, 2008. Teams may weigh in and enter as many wrestlers as they desire. It is encouraged for teams to have back-up performers. Entries are limited to eight teams. If we receive more than eight interested parties, a committee will select the participating teams.**
- Weights: 98, 103, 108, 114, 120, 125, 130, 140, 155, 175, and 220...plus one additional pound. There will be no second day weigh-ins.
- Schedule: To be mailed to entering teams.
- Awards: Team awards for the top four places.
- Housing and Transportation: This is the responsibility of the visiting teams.
- Tournament Tour Operator: Travel International Sports 1117 5th St. Suite C, Manhattan Beach, Calif. 90266.
Ph: (800)535-3574. Fax: (310)376-9379. TISworld.com



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ENTRY FORM**

When:	Monday and Tuesday, December 29-30, 2008
Where:	Iolani School, 563 Kamoku St Honolulu, Hawaii 96826
Contact:	Carl Schroers at 808-943-2208 or schroers@iolani.org
Entry Fee:	\$175 Due 11/14/08

School:	_____	League:	_____
Coach:	_____		
Address:	_____		
	Street	PO Box	City State Zip
Wk Phone:	_____	Hm Phone:	_____
Cl Phone:	_____		
Fax:	_____	email:	_____

Where would you like tournament information mailed?				
Address:	_____			
	Street	PO Box	City	State Zip

School Mascot:	_____	School Colors:	_____
Please list your team accomplishments.			

All tournament slots are subject to availability and approval by the tournament committee. Please enclose your entry fee with this form. All checks must be made out to "Iolani School."

_____	_____	_____	_____
Athletic Director's Signature	Date	Principal's Signature	Date

