

STREETSBORO NOVICE "VEIL GRINDER" NOVICE WRESTLING EVENT

1st & 2nd Year Wrestlers Only!

****TOURNAMENT TO BE RUN BY PAPER & PENCIL THIS YEAR, NOT ELECTRONIC TO AVOID PROBLEMS****

DATE: Saturday November 14, 2009

TIMES: 8:00 – 9:30 am weigh-ins 10:00 am wrestling will begin

LOCATION: 1900 Anna Lane Streetsboro, Ohio 44241
Streetsboro High School

AGES: 5 -12 1st & 2nd YEAR WRESTLERS ONLY!!!

ENTRY FEE: \$15.00 per wrestler PRE-REGISTRATION : **Make checks payable to " Streetsboro Youth Wrestling" ,
Send registrations to: Mike Formick, 748 Diane Dr., Streetsboro, Oh. 44241**
*Walk in registration \$20.00.

WEIGH-INS All wrestlers will be weighed in upon arrival. Weigh-ins will close at 9:30 am Sharp!

RULES: There will be three one minute periods. All periods start in the neutral position. If a wrestler goes out of bounds they will start in the neutral position. 10 points is a tech fall. Wrestlers will be given two warnings for illegal holds and then a point will be awarded. Overtime: unlimited time. First point scored in overtime determines the winner. Certified Officials.

FORMAT: 1st & 2nd year wrestlers will be paired up against other 1st & 2nd year wrestlers of similar age, weight. Weight classes maybe be combined if necessary. This is a tournament. If you have questions about this event please contact Mike Formick 330-606-8524 or by email at Mformick@neo.rr.com. This event will be limited to the first 250 wrestlers.

DIVISION: Division 1 = 6 & under Division 2 = 7 & 8 Division 3 = 9 & 10 Division 4 = 11 & 12

Weight Classes:

Division I : 5&6: 40,45,50,55, 60, 70, HVY (Max 95)

Division II : 7&8: 45,50,55,60,65,70,75,85, HVY (Max 115)

Division III : 9&10: 55, 60, 65, 70,75,80,86,93,100,115, HVY (Max 150)

Division IV : 11&12: 65,70,75,80,85,92,100,110,125,140,HVY (Max 185)

Awards: First and Second place finishers will be awarded trophies. Third and Fourth place will be awarded metals

WRESTLERS NAME: _____ CLUB/TEAM: _____ DIVISION: _____ ACTUAL WEIGHT: _____
(To be filled in at Weigh-Ins)

ADDRESS: _____ PHONE #: _____
Street City State Zip Code

DATE OF BIRTH: _____ AGE as of November 14, 2009: _____

EMERGENCY CONTACT NAME: _____ PHONE _____

I hereby give permission for my child to participate in the Streetsboro Novice Brawl Wrestling Tournament. It is understood that neither the Streetsboro Board of Education and the Streetsboro Recreation Department nor any of their agents, employees or tournament personnel are liable for any such injury which my child incurs. I accept full liability of any damage which may be caused by my child.

Signature of Wrestler: _____ Signature of Parent/Guardian: _____

Date: _____

Copy of Entry Form provided by www.OhioWrestler.com with permission of Streetsboro Youth Wrestling per Scott Templeton

