

# 3<sup>rd</sup> Annual Strongsville Early Bird Pool Style Wrestling Tournament

**Sunday October 21<sup>st</sup>, 2007**

**6 Mats & 2 full sized Gymnasiums**

**Strongsville H.S. 20025 Lunn Rd, Strongsville, Ohio 44149**

<b>Wrestling Times: Div 1, 2, 3 - 9:00 am</b>	<b>Div 4, 5 - 12:00 pm</b>	<b>Check in 1 hour early</b>
Division 1 8 & under	Division 2 9 & 10	Division 3 11&12
Division 4 13 &14	Division 5 15 to 18	

Wrestlers will be assigned into pools. Weight classes to be formed based on entries received. This format is designed with the intention of guaranteeing each wrestler 3 or 4 matches. Every effort will be made to assure 4 matches. However, the number of entries will dictate the number of matches for each weight class.

**Please indicate your number of years of wrestling experience and your ACTUAL weight on the registration form in order to help us form the pools. Wrestler's weights may be checked before wrestling begins to verify call in weights.**

Weigh-Ins at Strongsville High School

6-8 pm on Wednesday & Thursday October 17<sup>th</sup> and 18<sup>th</sup>

Wrestlers over 20 miles away may have **actual** weights submitted by coach only

Contact Al Evangelista 440-572-5327 evenings or preferably

E-mail: [devangelista@wowway.com](mailto:devangelista@wowway.com) All emails, money and entry forms

**must be received by Friday October 19<sup>th</sup>!**

Rules: Modified High School Rules. All starts in neutral position. Age as of date of Tournament

Bout Times: Divisions 1, 2 & 3 2 - 1 and 1/2-minute periods  
Divisions 4 & 5 2 - 2-minute periods  
Outstanding Awards - 1st - 3rd Place

Entry Fee-\$15.00 (Tournament will be closed out at 300 wrestlers-no exceptions!)

Mail Registration forms to: Mustang Wrestling Club, 18471 Hunt Rd., Strongsville, Ohio 44136

Include checks payable to: Mustang Wrestling Club

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In consideration of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors and administrators, waive and release the Strongsville Board of Education, Strongsville High School, The Mustang Wrestling Club, representatives, committee members from any and all claims of right to damages for injuries suffered by me directly or indirectly traveling to and from or competing in the Mustang Open Wrestling tournament.

Name \_\_\_\_\_ Age / Division \_\_\_\_\_ Phone \_\_\_\_\_

School / Team \_\_\_\_\_ Circle 1: Years of experience 1 2 3 4 or more Actual Weight \_\_\_\_\_

Signature of Athlete \_\_\_\_\_ Signature of parent or Guardian \_\_\_\_\_

E-mail Address \_\_\_\_\_

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**Copy of Entry Form provided by [www.OhioWrestler.com](http://www.OhioWrestler.com)  
with permission of Mustang Wrestling Club per Dave Bolger**

