



OhioWrestler.com
TOP 20 LIST

Cloverleaf Open Tournament



Date: SATURDAY, November 8, 2008
Where: Cloverleaf High School, 8525 Friendsville Road, Lodi, Ohio
Weigh-In: Friday, Nov. 7th from 7-9 pm & Sat. Nov. 8th from 6-8 am at Cloverleaf H.S.
Wrestling starts at 9:00 am for wrestlers 8 years and under.
Wrestling starts at 12:00 pm for wrestlers 9 years and older.

<u>Wt Classes:</u>	<u>AGE</u>	<u>WEIGHT CLASSES</u>
	6 and under (2 x 1 min periods)	40, 45, 50, 55, 60, 70, Hwt (max 90)
	7 and 8 (2 x 1 min periods)	40, 45, 50, 55, 60, 65, 70, 75, Hwt (max 95)
	9 and 10 (2 x 1 ½ min periods)	50, 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, Hwt (max 140)
	11 and 12 (2 x 1 ½ min periods)	65, 70, 75, 80, 85, 90, 95, 100, 110, 120, 130, 140, Hwt (max 175)
	13 and 14 (2 x 1 ½ min periods)	80, 85, 90, 95, 100, 105, 110, 115, 125, 135, 145, 155, Hwt (max 205)

Tournament officials reserve the right to combine or create weight classes to protect the wrestler and/or promote a better tournament. **A wrestler may not enter more than one weight class. HEAD GEAR IS MANDATORY!!**

Entry Fee: \$15.00 - **Please make checks payable to Cloverleaf Wrestling.**
Awards: Medals through the first four places, T-shirts for champions.
Admission: \$1.00 for children \$3.00 for adults
Limit: First 500 participants. Weight classes with less than 3 wrestlers will be combined with another class.
Matches: Modified OHSAA rules. Periods are 1-1 for ages 8 and under and 1½ - 1½ for ages 9 thru 14. All periods start on your feet. Sudden death overtime. Double elimination. 12 point lead ends the match. Certified referees will be used.

Concessions: Served all day.

For more information, please contact: Ken Arend: 330-321-2320 Email: karend@mmm.com

Name _____
Address _____ City _____ State _____ Zip _____
Email _____ Club or School _____
Age Group _____ Birth Date _____

Age Group Classification – A wrestler's age on November 8, 2008 will determine the appropriate age group. Please bring a copy of the wrestler's birth certificate for spot check confirmations.

In consideration of your acceptance of this entry, the undersigned individual and, or in representation capacity as parent or guardian for themselves and for their heirs, administrators or assigns, hereby waive, release and hold harmless CLOVERLEAF SCHOOLS, CLOVERLEAF BOARD OF EDUCATION, all tournament officials and administrators, and all other persons or entries having official involvement with their tournament for any and all claims for rights by training or traveling to or from and/or participation in or in any way arising out of the Cloverleaf Open Tournament.

WRESTLERS SIGNATURE _____ Date _____
PARENT/GUARDIAN SIGNATURE _____ Date _____

PLEASE MAKE ALL CHECKS PAYABLE TO : Cloverleaf Wrestling

Copy of Entry Form provided by www.OhioWrestler.com
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