

2008 JEFFERSON WARM-UP WRESTLING TOURNAMENT
THIS TOURNAMENT IS AN OHIOWRESTLER.COM TOP 20 POINT SCORING EVENT
Bracketing will be done manually

WHERE: Jefferson Area High School , 125 South Popular Street, Jefferson , Ohio
Tournament Director: Matt Cole

WHEN: Saturday, November 22, 2008 Ages 0-6, 7&8, and 9-10 8:30 a.m.
Ages 11-12 and 13-15 be at the school at 12:00 p.m.

WHO: Ages 0-15 as 11/17/07 PARTICIPATION IN THIS TOURNAMENT **WILL NOT** VIOLATE OHSAA GUIDELINES

AWARDS: Plaques for 1st through 4th Weight bracket will be engraved on the 1st place plaque

ENTRY FEE: \$15.00 at weigh-in
Make checks payable to: JEFFERSON AREA WRESTLING CLUB

ADMISSION: \$3.00 for all non-wrestlers Senior Citizens and under six are free

RULES: Modified OHSAA rules: periods: 1 ½ - 1 ½ : 20 minutes minimal rest between matches
Except double bracketing: 30 second sudden death overtime with a 30 second tie breaker if
Necessary: double elimination: start neutral both periods: certified officials: **8 man brackets**



<u>CLASSES:</u>	<u>AGE:</u>	<u>WEIGHT:</u>
	0-6	40,45,50,55,65,HWT
	7-8	45,50,55,60,65,70,75,80,HWT
	9-10	60,65,70,75,80,85,90,95,105,115,125,135,HWT
	11-12	70,75,80,85,90,95,105,115,125,135,145,HWT
	13-15	80,86,92,98,104,110,116,122,128,134,142,150,160,172,230

Limited to 400 participants: weight classes with 4 wrestlers or less may be combined with another class: no wrestlers will be moved to HWT without the parents or coaches permission.

WEIGH-INS: JEFFERSON AREA HIGH SCHOOL , 125 S. Poplar St. , Jefferson , OH
Wednesday, November 19 6:00 p.m. – 7:30 p.m. Matt Cole: Day: (440)813-3638 Evening: (440)224-3487

AMERICAN LEGION, Broad and State St. , Conneaut , OH
Wednesday, November 19 5:30 p.m. – 7:30 p.m. Mike Sanford (440)599-8063

Entry deadline Nov.20 2008 by 7:00pm

BRING TO WEIGH-INS: Birth certificate or written proof of age: parent/guardian permission slip: entry fee

FOOD: Concession stand will be open all day

INFO: Contact : rachelcole_1@hotmail.com with any questions and/or concerns.

***** There will be a mini clinic before each session with Cleveland State University head coach Ben Stehura.*****

Name: _____ Age Group: _____ D.O.B _____

Club/School: _____ Weight Class: _____

Last Years Record: _____ Phone number: _____

Address: _____

I hereby give permission for my child to participate in the Jefferson Warm-Up Wrestling Tournament. It is understood that neither the Jefferson Area Board of Education nor any of their agents, employees, or tournament personnel are liable for any injury which my child incurs. I accept full responsibility for any damages which may be caused by my child.

Parent Signature

Wrestler Signature

**Copy of Entry Form provided by www.OhioWrestler.com
with permission of Jefferson Wrestling Club per Matt Cole**

