

STREETSBORO NOVICE BRAWL

NOVICE WRESTLING EVENT

1st & 2nd Year Wrestlers Only!

DATE: Saturday November 15, 2008

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

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

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

ENTRY FEE: \$10.00 per wrestler Pre-register -- \$ 15.00 day of event to be paid at the door prior to weigh-ins. Make checks payable to " Streetsboro Youth Wrestling " Pre-Registrations to: **Mike Formick, 748 Diane Dr., Streetsboro, Oh. 44241**

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 neutral. If a wrestler goes out of bounds they will start in the neutral position. Each period 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: 1st and 2nd place finishers will be awarded trophies. 3rd and 4th place finishers will be awarded medals.

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 15, 2008: _____

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

