

3rd Annual Lima Bath Brawl

Smackdown on Slabtown

Qualifier for the Ohio Tournament of Champions

An OhioWrestler.com Top 20 Point Scoring Event



OhioWrestler.com
TOP 20 LIST

WHERE: Bath High School
2850 Bible Road
Lima, Ohio 45801

WHEN: Saturday March 14th, 2009

WRESTLING BEGINS: 10:00 AM

WEIGH INS: Friday, March 13th – 6:30 – 8:30 pm
Saturday, March 14th – 7:00 – 8:30 am

ENTRY FEE: \$15.00 if postmarked before March 7th, 2009,
\$18.00 if postmarked after March 7th or at walk-in registration.
Mail entry form and make check payable to: Bath Youth Wrestling
2699 Autumn Ridge Dr.
Lima, Ohio 45801

FORMAT/RULES: Modified high school rules for all divisions, 12 point technical fall, double elimination, bout length 1-1-1 (neutral, choice, choice), maximum 8 man brackets, brackets with 4 or less will be round robin, sudden death overtime. Certified officials will be used. **We reserve the right to combine weight classes.**

AWARDS: Custom Tournament Trophies for 1st through 3rd place.

ADMISSION: \$3.00 for adults, \$1.00 students, or \$5.00 for a family

CONCESSIONS: Served all day in the cafeteria

DIVISION	AGE	WEIGHTS
I	6 and under	40-45-50-55-60-65-HWT
II	7 and 8	45-50-55-60-65-70-75-HWT
III	9 and 10	55-60-65-70-75-80-85-90-100-115-HWT
IV	11 and 12	65-70-75-80-85-90-95-105-115-130-145-HWT
V	13 and 14	75-80-85-90-95-100-110-120-130-140-155-170-HWT
VI	15 to 18*	97-104-111-118-125-135-145-155-165-175-185-200-HWT

* must be in high school

QUESTION? Contact Person: Lewie Chandler @ 419.222.8043 or tchandler1@woh.rr.com

Age as of the tournament date. Have proof of age available the day of the tournament in case of questioning

I hereby give permission to the child listed on this form to wrestle at this tournament. My signature below releases all sponsoring bodies, their officials and referees from any and all legal claims or rights to damage for injuries or losses suffered by my child or myself directly or indirectly while training for, traveling to and from, or participating in this event.

WRESTLER: _____ AGE: _____ DOB: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

SCHOOL: _____ PHONE: _____ DIVISION: _____ WEIGHT: _____

Signature of Wrestler: _____

Signature of Parent/Guardian: _____

Copy of Entry Form provided by www.OhioWrestler.com
with permission of Bath Youth Wrestling per Lewis Chandler

