

Attention: NEW DATE

6th ANNUAL CLAYMONT OPEN WRESTLING TOURNAMENT
APRIL 11th, 2009 @ CLAYMONT HIGH SCHOOL
4205 INDIAN HILL RD. SE, UHRICHSVILLE, OH 44683



ENTRY FEE: \$15.00 MAIL-INS MUST BE POSTMARKED BEFORE MONDAY, APRIL 6TH
\$18.00 CALL-INS WILL BE TAKEN THRU THURSDAY APRIL 9TH
CALL: JAMIE WARNER 330-432-1522 OR JESSICA ENOS 330-432-2727 *****NO REFUNDS*****
****WALK-INS WILL BE ACCEPTED FOR A \$20.00 FEE!
****A WRESTLER MAY ENTER 2nd AGE DIVISION FOR ADDITIONAL \$10.00!

SEND MAIL-INS TO: CLAYMONT ATHLETIC DEPARTMENT, -4205 INDIAN HILL RD. SE,
UHRICHSVILLE, OH 44683 MAKE CHECKS PAYABLE TO: CLAYMONT MOTHERS CLUB

WEIGH-INS: FRIDAY, APRIL 10TH 6:30 - 8:30p.m. ***ALL DIVISIONS
SATURDAY 7:00 - 8:30 A.M. FOR DIVISION 1-4* WRESTLING STARTS @ 9:30A.M.
SATURDAY 11:00 - 12:00 P.M. FOR DIVISION 5&6* WRESTLING APPROX. 1:00 P.M.

RULES: DOUBLE ELIMINATION, 3 ONE MINUTE PERIODS FOR DIVISION 1-4, AND 3 ONE AND A HALF MINUTES FOR DIVISIONS 5&6. SCHOLASTIC RULES APPLY WITH SUDDEN DEATH OVERTIME. WE RESERVE THE RIGHT TO COMBINE WEIGHT CLASSES. SEEDING MEETING WILL BE BLIND DRAW, WITH EVERY EFFORT TO SEPARATE WRESTLERS FROM SAME TEAM.

AWARDS: TOP FOUR WILL RECEIVE AWARDS AND THE CHAMPION WILL RECEIVE A T-SHIRT.
NOTE: NO COOLERS, FOOD, OR DRINKS ALLOWED IN GYM. CONCESSIONS OPEN ALL DAY WITH BREAKFAST FOOD SERVED EARLY.

WEIGHT CLASSES AND DIVISIONS: WRESTLERS WILL BE PLACED IN DIVISION OF AGE AS OF DAY BEFORE TOURNAMENT. IF YOUR BIRTHDAY IS THE DAY OF THE TOURNAMENT YOU WILL NOT BE MOVED UP. BRING PROOF OF AGE TO VERIFY IF CHALLENGED. ELITE WRESTLERS MUST STILL BE ENROLLED IN HIGH SCHOOL!

DIV. 1 BANTUM (6&U) - 40, 46, 52, 58, UNL (MAX 85)
DIV. 2 MIDGET (7&8) - 52, 59, 66, 73, 80, UNL (MAX 110)
DIV. 3 JUNIOR (9&10) - 58, 64, 70, 76, 83, 90, 100, UNL (MAX 140)
DIV. 4 SCHOOLBOY (11&12) - 60, 67, 73, 80, 88, 96, 104, 112, 120, 140, UNL (MAX 200)
DIV. 5 INTER (13&14) - 80, 88, 96, 104, 112, 120, 128, 136, 145, 155, 165, 175, UNL
DIV. 6 ELITE (15-18) - 110, 119, 128, 137, 145, 155, 165, 180, 200, UNL

NAME _____ PHONE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

AGE _____ BIRTHDATE _____ DIVISION _____

WEIGHT CLASS _____ COACHES NAME _____ TEAM _____

IN CONSIDERATION OF YOUR ACCEPTANCE OF MY ENTRY, I AND LEGAL HEIRS DO HEREBY WAIVE AND RELEASE ANY AND ALL CLAIMS I MAY HAVE AGAINST CLAYMONT HIGH SCHOOL AND/OR TOURNAMENT OFFICIALS, SPONSORS OR ADMINISTRATORS FOR ANY AND ALL INJURIES SUFFERED BY ME IN CONNECTION WITH SAID TOURNAMENT.

PARENT/GUARDIAN

WRESTLER SIGNATURE _____ DATE _____

PARENT SIGNATURE _____ DATE _____

Copy of Entry Form provided by www.OhioWrestler.com
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