



Toledo Central Catholic Spring Tournament

Sunday March 1st, 2009

An OhioWrestler.com TOP 20 Point Scoring Event

Six Age groups - Ages 5 through 18



OhioWrestler.com
TOP 20 LIST

Tournament Location: Toledo Central Catholic High School, Sullivan Center
2550 Cherry St. Toledo, OH 43608

Registration: online at www.cchswrestling.org or mail this form to the address below

Weigh-ins: Thur Feb 26th 6:00-7:30pm at FOXFIRE WRESTLING CLUB 6222 Merger Dr Holland OH
Sun Mar 1st - 7:00-8:00am at CCHS Sullivan Center (D4 – D6 weigh-ins continued 10:00-11:00am)

Wrestling Begins: 9:00 am - D1, D2, D3 (Age as of 2/28/09: D1: 6 & under; D2:7-8; D3:9-10)
~12:30 pm - D4, D5, D6 (D4:11-12; D5:13-14, D6: 15-18 High School Wrestlers are eligible)

Weight Classes determined by tournament committee - Attempt to place at least 4 wrestlers in a wt class.
Divisions D1-D3 will wrestle three 1 minute periods (feet, choice, choice)
Divisions D4-D6 will wrestle three 1.5 minute periods (feet, choice, choice)
Overtime: Sudden Victory 1min, followed by 30 second T/B. Technical Fall is 12 points
Wrestling attire: singlet or T-shirt tucked into shorts - No sweats or baggy clothes

Officials: Only Certified Officials will be used. Email questions to: john@cchswrestling.org or call 419.345.0214

Entry Fee: \$15 if postmarked prior Mon Feb 23 or submitted online prior to 10pm Wed Feb 25, \$20 at weigh-ins.
Teams/clubs with 10+ registrations call prior to Feb 23 for discount. Make checks payable to 'Junior Rocks Wrestling Club'

Individual awards: Awards to top 3 places, **Champion also receives a T-shirt.**
Digital photos of place winners will be placed on web for free download.

Admission: Adults-\$5.00, Students-\$3.00 **Food:** Concessions will be available.

-To register by mail - Cut and return bottom portion only - Mail Early Entries to: TCC Spring Tournament, 7541White Pine Ct. Sylvania, OH 43560-----

Name(Print)_____ Age_____ Division_____ Birth Date_____

Address_____ City/State/Zip_____

School/Club Name_____ Years Exp._____

Email address_____

In Consideration for acceptance of this entry, I hereby waive and release for myself, my heirs and administrator, all rights and claims for damages against Toledo Central Catholic High School, Junior Rocks Wrestling Club, Wrestling Tournament personnel, or their representatives for any and all injuries suffered by me at this tournament.

Parent/Guardian Signature/Date _____ Phone _____

Wrestler Signature/Date _____

Do not write below this line _____ Tournament use only _____

Paid _____ Cash _____ Check (check # _____) Official Weight _____

Copy of Entry Form provided by www.OhioWrestler.com with
the permission of Firefox Wrestling Club per Fred Williams

