

UPPER SANDUSKY P.A.L. WRESTLING TOURNAMENT  
AN OHIOWRESTLER.COM TOP 20 POINT SCORING EVENT

SATURDAY MARCH 28, 2009



OhioWrestler.com  
TOP 20 LIST

**LOCATION:** UPPER SANDUSKY H. S. / 800 NORTH SANDUSKY ST. / UPPER SANDUSKY, OH 43351

**WEIGH-INS:** THURSDAY AND FRIDAY 6:00PM-9:00PM at High School. The COACH may call in weights further than 25 miles, or e-mail to [bthornton@farmerscommission.com](mailto:bthornton@farmerscommission.com) or fax 419-673-1725 before Friday March 26<sup>th</sup> at 5pm

**TIME:** Wrestling will begin at 9:30AM.(MUST BE CHECKED IN ON SATURDAY 3/28/09 BEFORE 7:30AM)

**RULES:** Modified High School, Double Elimination 2-11/2 Minute Periods- All Start in the Up Position. Sudden Death Overtime. Technical Fall 12points

**ENTRY FEE:** \$15.00 Before March 24<sup>th</sup> after deadline entry fee goes to \$20.00.

**REGISTRATION WILL LIMIT TOURNAMENT TO 500 WRESTLERS.**

ALL REGISTRATION MUST HAVE ENTRY FEE ATTACHED ONLY EXCEPTION WOULD BE CALL ENTRIES FROM INDIVIDUALS COACH.

**ADMISSION:** ADULTS-\$4.00 CHILDREN UNDER 5 FREE. FAMILY \$20.00( MAXIMUM 6 PEOPLE)

**AWARDS:** 1<sup>ST</sup> PLACE PLAQUE 2<sup>ND</sup>, 3<sup>RD</sup> 4<sup>TH</sup> RECEIVE MEDALS.

**TEAM AWARDS** FOR 1<sup>ST</sup>, 2<sup>ND</sup>, 3<sup>RD</sup> PLACE ( TEAMS MUST HAVE MINIMUM OF 15 ATHLETES)

**FOOD:** CONCESSION, HOT FOOD AND BEVERAGE SERVED ALL DAY.

**DRESS:** T-SHIRT AND SHORTS OR SINGLET; NO SWEATS PLEASE.

**WEIGHT CLASSES:**

DIVISIONS	AGE:	WEIGHTS:
I	6-under	35,40,45,50,55,60,HVT
II	7-8	45,50,55,60,65,70,75,80,HVT
III	9-10	55,60,65,70,75,80,85,90,95,100,HVT
IV	11-12	60,65,70,75,80,85,90,95,100,110,120,130,HVT
V	13-14	80,86,92,98,104,110,116,122,128,134,147,152,160,172,HVT
VI	15-18	103,112,119,125,130,135,140,145,152,160,171,189,215,HVT
VII	old timers	130,140,150,160,170,180,190,210,230,HVT

**THIS TOURNAMENT IS A QUALIFIER FOR THE TOURNAMENT OF CHAMPIONS IN COLUMBUS\*\***

THE TOURNAMENT DIRECTOR RESERVES THE RIGHT COMBINE OR DELETE WEIGHT CLASSES OR DIVISIONS. FOR ADDITIONAL INFORMATION CALL THE FOLLOWING: BILL THORNTON 419-294-4713 AFTER 5PM OR TODD FREY 419-458-2004 AFTER 6PM.

SEND ALL ENTRIES TO THE FOLLOWING : P.A.L. c/o Bill Thornton 1053 Edgewood Drive Upper Sandusky Ohio 43351.

NAME \_\_\_\_\_ CLUB/TEAM \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ AGE \_\_\_\_\_ WEIGHT \_\_\_\_\_

IN CONSIDERATION OF YOUR ACCEPTANCE OF MY ENTRY; I AM INTENDING TO BE LEGALLY BOUND FOR MYSELF, WAIVE AND RELEASE THE P.A.L UPPER SANDUSKY MIDDLE AND HIGH SCHOOL, THE OFFICIALS, TOURNAMENT DIRECTORS, WORKERS, COACHES, FROM CLAIMS OF RIGHT TO DAMAGES FOR INJURIES OR LOSS SUFFERED BY ME AT THIS TOURNAMENT.

PARENT/GUARDIAN \_\_\_\_\_

WRESTLER \_\_\_\_\_

Copy of Entry Form provided by [www.OhioWrestler.com](http://www.OhioWrestler.com) with permission of Police Athletic League per Bill Thornton

