



Genoa Comet Biddy Wrestling Tournament at Genoa High School

2980 N. Genoa Clay Center Rd., Genoa, Ohio 43430

Sunday, February 21, 2010 at Noon

rescheduled from February 6 weather cancellation

TEAM CHAMPIONSHIP

An OhioWrestler.com TOP 20 Point Scoring Event



OhioWrestler.com
TOP 20 LIST

Team Entries limited to 20 wrestlers per team. Coaches will identify at weigh-ins. You do not have to be on a team to wrestle in the tournament. Clubs may enter more than one team.

CHAMPION, SECOND and THIRD PLACE TEAM TROPHIES

No weigh-ins the day of the tournament; Entries limited to first 320 wrestlers

Registration and Weigh-ins: Friday, February 19 from 6-7:30 pm or Saturday, February 20 from 4-6 pm at the Athletic Complex behind Genoa HS (Birth Certificate required if age is challenged)

* *E-mailed weigh-ins only accepted by club coaches if further than 40 miles, wrestler is registered, payment has been received, and weights e-mailed by 8 pm Feb. 19.*

Entry Fee: \$18 (all registrations, payment, and weigh-ins from Feb. 6th cancellation are accepted)

Checks Payable To: Genoa H.S. Athletic Dept.

Mail Entries To: Genoa Biddy Tournament
c/o Joseph Ziebold
2980 N. Genoa Clay Center Rd.
Genoa, Ohio 43430

Questions: Dom D'Emilio
419-277-3780
dom.demilio@genoawrestling.com

Admission: \$3.00 Adults, \$2.00 Students (6 and older), \$6.00 Family

Trophies: 1st, 2nd, 3rd, and 4th places for each weight class

Team Points: 1st - 5 points, 2nd - 3 points, 3rd - 2 points, 4th - 1 point

Rules: (Modified OHSAA Rules) Three 1.5 minute periods for Divisions 3 & 4, with restarts in referees position or neutral as needed; Two 1.5 minute periods for Divisions 1 & 2 with all starts and restarts in neutral

DIVISION AGE WEIGHTS (*wrestlers may only wrestle in one weight class*)

1	6 and under	Weight classes will be established after weigh-ins. We will attempt to place wrestlers in 8-man brackets. Any bracket with three or four wrestlers will use a round-robin format. Any bracket with two wrestlers will wrestle 2 out of 3. No Junior High School wrestlers or 7th graders.
2	7-8	
3	9-10	
4	11-12	

Name: _____ Birth Date: _____ Age (as of 2/6/10): _____

Wrestling Club: _____ Grade: _____ Division: _____

Address: _____ City/State/Zip: _____

E-mail: _____ Phone: _____

In consideration for acceptance of this entry, I hereby wave and release for myself, my heirs and administer, any claims for damage against Genoa Area Schools, Genoa Biddy Wrestling tournament personnel, or their representatives for any an all injuries suffered by me at this wrestling tournament.

PARENT SIGNATURE _____ DATE _____

Copy of Entry Form provided by www.OhioWrestler.com with permission of Genoa High School Athletic Dept. per Dominic D'Emilio

