

OLMSTED FALLS OPEN WRESTLING TOURNAMENT

March 12-13, 2010

THIS TOURNAMENT IS A QUALIFIER FOR THE
OHIO TOURNAMENT OF CHAMPIONS IN COLUMBUS. (TOP 3 QUALIFY)

*** An OhioWrestler.com TOP 20 List Point Scoring Event ***



OhioWrestler.com
TOP 20 LIST

WHERE: Olmsted Falls High School, 26939 Bagley Road- Olmsted Falls, Ohio 44138

TIMES: 7 & Under 6:00 p.m. Friday March 12
 8 & 9 6:00 p.m. Friday March 12
 10 & 11 7:30 p.m. Friday March 12
 12 & 13 8:30 a.m. Saturday March 13
 14 & 15 10:15 a.m. Saturday March 13
 16 & 18 12: 15 p.m. Saturday March 13
 OPEN 12:30 p.m. Saturday March 13

WEIGH-IN: Thursday: March 11, 2010 (From 4:30-7:00) You MUST be entered into the tournament by Thursday at 7:00 p.m. (WEIGHT CLASSES WILL BE FORMED AFTER WEIGH-INS.)

AWARDS: Top 4 finishers in each weight class will receive awards

ELIGIBILITY: 1. AGE DAY OF TOURNAMENT
 2. SENIORS MUST COMPETE IN THE OPEN DIVISION
 3. IF A WRESTLER IS COMPETING IN TWO AGE DIVISIONS,
 2 FORMS MUST BE FILLED OUT

ATHLETIC HOTLINE 440-427-6158- Tournament status # IN CASE of inclement weather

ENTRY FEE: \$20.00

MAKE CHECKS PAYABLE TO: Olmsted Falls Booster Club

MAIL TO: Bill McGrain, Olmsted Falls High School
 26939 Bagley Road
 Olmsted Falls, Ohio 44138

INFORMATION: Call: Tracey McGrain (440-427-6109 between 9:00-3:30 p.m. Daily) 330-483-6001 in the evenings but not after 9:30 p.m. No long distance calls will be returned.

OLMSTED FALLS OPEN TOURNAMENT FORM (Please PRINT this form)

Name _____ Grade _____ Age - Day of Tournament _____

Address _____ City _____ Phone: _____

In consideration of your acceptance of my entry, I, intending to be legally bound, hereby for myself, my heirs, executor, and administrator, waive and release Olmsted Falls High School, Olmsted Falls Board of Education, the Olmsted Falls Booster Club, their agents, representatives, committees, and members from any claims or rights to damages for injuries or losses suffered by me directly or indirectly in training, or traveling, to or from competing in or attending the Olmsted Falls High School Open Tournament.

Parent Signature: _____

Emergency Contact Phone Number/Cell _____

Copy of Entry Form provided by www.OhioWrestler.com with
permission of Olmsted Falls Booster Club per Bill McGrain

