

# “To Test the Best”

## AMHERST 6-MAN ROUND ROBIN TOURNAMENT

**DATE:** Nov. 13<sup>th</sup> 2005 (SUNDAY)

**PLACE:** Amherst High School- 450 Washington St. Amherst, OH 44001

**TIME:** 9:00 am START!

**\*\*\*NO SUNDAY WALK-INS\*\*\***

**ENTRY FEE:** \$10.00! **\*\*\*FIRST 250 PAID ENTRIES!\*\*\***

**AGE DIVISIONS:** DIV.(I):8&UNDER, (II):9&10, (III):11&12, (IV):13&14 (No 9<sup>th</sup> graders)

**PARENTS/COACHES SHOULD USE DESCRETION ON 6& UNDER WRESTLERS!**

**WEIGH-INS:** Saturday 6:00pm – 8:00pm & Sunday 6:00am – 7:30am sharp!!

Weigh-ins for Amherst will also be held during Elyria’s Cy-Pinter on Nov. 12<sup>th</sup> !

Out-of-towners that will be doing both Cy & 6-man, Motel 6 (440)988-3266

Days Inn (440)985-1428 both at intersection of Rt. 58 and Rt. 2, 1 mile from AHS

*\*\*\*All wrestlers must have weight checked prior to Sunday morning 7:30 am!!\*\*\**

**Amherst Weigh-in location:** south end of building follow signs.

**Continental breakfast will be available Sunday morning.**

**AWARDS:** Medals 1<sup>st</sup> – 3<sup>rd</sup> place finishers.

**BRACKETS:** Madison system, no weight classes. (grouped within 10% of weight.)

We will try to get all wrestlers in 6 man brackets! If 3 man or less,

May combine with parent/coach approval. This day is about getting matches!!

**RULES: MODIFIED HIGH SCHOOL. AGE AS OF DAY OF TOURNAMENT, BRING PROOF OF AGE.**

**BOUT LENGTH:** 1½ - 1½ OT - SUDDEN DEATH

**SEEDING:** Seeding will be done based on Experience Level/Record and Past Honors.

**Mail Entries to:** *Amherst Youth Wrestling 818 Valley Dr. Amherst, OH 44001*

*Make checks payable to: AMHERST YOUTH WRESTLING*

*Questions call: Elliot Lewis at 440-984-4447 or email: [ealewis@eriecoast.com](mailto:ealewis@eriecoast.com)*

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**Experience Level (Not Years Wrestled) 1 2 3 4 5 circle one that applies 1 = best**

**Wrestler** \_\_\_\_\_ **Age Division** \_\_\_\_\_ **Weight** \_\_\_\_\_

**Address** \_\_\_\_\_ **School/Team affiliation** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_ **E-mail Address** \_\_\_\_\_

**DOB:** \_\_\_\_\_ **RECORD 2004-2005** \_\_\_\_\_ **Honors** \_\_\_\_\_

I hereby give this wrestler permission to wrestle in the Amherst Youth 6 Man Round Robin Tournament and release the Amherst School District and all sponsoring bodies, their officers, tournament officials and referees from all liability.

Wrestler’s Signature \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

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**Copy of Entry Form provided by [www.OhioWrestler.com](http://www.OhioWrestler.com)  
with permission of Amherst Youth Wrestling per Elliot Lewis**

