

**16th Annual
Cy Pinter Open
Wrestling Tournament**

When: Saturday, November 4, 2006

Where: Elyria High School, Vic Janowicz Drive (311 6th Street), Elyria, OH 44035

Weights and Divisions (Age as of day of tournament)

Div I 8 yrs. And under: 45-50-55-60-65-70-75-85-HVY (100 lbs. Max)

Div II 9-10 yrs. 50-55-60-65-70-75-80-85-90-95-100-110-120-HVY (140lbs. Max)

Div III 11-12 yrs. 60-65-70-75-80-85-90-95-100-105-110-120-130-140-150-HVY (175 lbs. Max)

Div IV 13-14 yrs. 75-80-85-90-95-100-105-110-115-125-135-145-155-165-175-HVY (215 lbs. Max)

Div V High School 103-112-119-125-130-135-140-145-152-160-171-189-215-HVY (275 lbs. Max)

Periods: 3- 1 1/2 minute periods

Awards: Trophies for top three placers.

Weigh-ins: Saturday 6:30-8:00 am. for Div. I and III

Saturday 8:30-10:00 am. for Div. II, IV and V

Rules: High School rules with double elimination. Over-time will be 1 minute sudden victory, followed by :30 second tiebreaker (if needed).

Time: Divisions I and III will begin at 9:00 am Saturday, Nov. 4, 2006

Divisions II, IV and V will begin at NOON Saturday, Nov. 4, 2006

A wrestler may compete in more than one division

Entry Fee: \$18.00 per entry – make checks payable to “Elyria High Friends of Wrestling”

TRAVELING TEAMS COACHES ONLY MAY CALL ABOUT WEIGH-INS and ENTERING BY FAX! You must be traveling at least 30 miles in order to fax weights . Please call before November 2nd . Faxed weights may be challenged.

This tournament is a qualifier for the Ohio Tournament of Champions.

For more information, contact Erik Burnett at 440-225-5793 or Art McHenry at 216-973-5139. If no answer, leave message.

Entry Form

In consideration of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors and administrators, waive and release the Elyria Board of Education, Elyria High School, Elyria Pioneer Club, representatives, committee members from any and all claims of right to damages for injuries suffered by me directly or indirectly in traveling to, from, or competing in the Cy Pinter Open.

PLEASE PRINT

Name _____ Phone _____

Address _____ City _____ Zip _____

Division _____ Weight _____ Age _____ Birthdate _____

Signature of Athlete _____

**Signature of Parent or Guardian _____

Copy of Entry Form provided by www.OhioWrestler.com with permission of Elyria High Friends of Wrestling per Erik Burnett

