

The Wooster Spring Wrestling Open

Saturday, April 3, 2010

This tournament contains both an "Open" Youth Division and a "Rookie" Youth Division (for first and second year wrestlers). If you began wrestling before November 1, 2008 you are not eligible for the Rookie Division and must compete in the "Open" Youth Division. This tournament is an Ohio Wrestler Top 20 Event, so please make sure your name is legible on the entry form so your placement can be sent correctly to Ohio Wrestler!

Tournament Location: Wooster High School, 515 Oldman Rd, Wooster, Ohio.

<u>AGE GROUP</u>	<u>WEIGHT CLASSES</u>	<u>WEIGH-IN</u>	<u>START TIME</u>
5-6 Open	40,45,50,55,60,70,Hwt	10:00-11:00 a.m.	12:00 p.m.
7-8 Open	45,50,55,60,65,70,75,85,Hwt	10:00-1:30 p.m.	2:30 p.m.
9-10 Open	55,60,65,70,75,80,86,93,100,115,Hwt	10:00-1:30 p.m.	2:30 p.m.
11-12 Open	65,70,75,80,85,92,100,110,125,140, Hwt	10:00-1:30 p.m.	2:30 p.m.
13-14 Open	80,85,90,95,100,105,112,119,126,132,138,145,160,180,Hwt	10:00-11:00 a.m.	12:00 p.m.
15-19 (no grads!)	103,112,119,125,130,135,140,145,152,160,171,189,215,285	10:00-1:30 p.m.	2:30p.m.
Masters (19 and up)	133,149,165,184,215,285	10:00-11:00 a.m.	12:00 p.m.

"ROOKIE" DIVISION TOURNAMENT (FIRST AND SECOND YEAR)

<u>AGE GROUP</u>	<u>WEIGHT CLASSES</u>	<u>WEIGH-IN</u>	<u>START TIME</u>
7-8 Rookie	45,50,55,60,65,70,75,85,Hwt	10-11:00 a.m.	12:00 p.m.
9-10 Rookie	55,60,65,70,75,80,86,93,100,115,Hwt	10-11:00 a.m.	12:00 p.m.
11-12 Rookie	65,70,75,80,85,92,100,110,125,140,Hwt	10-11:00 a.m.	12:00 p.m.

Awards: Open Division: 5-6, 7-8, 9-10, and 11-12. Top three place finishers receive trophies.
13-14, 15-19, and Masters age group: Top Three place finishers receive medals.
Rookie Division: Top three finishers receive medals.

Entry Fee: \$20, at the time of weigh-ins. No pre-registrations.

Rules: Modified Scholastic Rules will be used for all divisions. Tournament will be double elimination. Sudden death overtime will be used in case of a tie. All periods start from the neutral position. All restarts are from the neutral position. Tournament Director reserves the right to combine weight classes upon need.

Concessions: Will be served all day, including a full breakfast.

Contact Information: Jason Hickey: 419-651-2165 Email: woosterspringopen2010@gmail.com

In appreciation of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors, and administrators, waive and release the Wooster Wrestling Team, Wooster High School, officials, tournament directors, workers and all representatives from any and all claims of right to damages for any injury suffered by me directly or indirectly as a result of competing at this tournament.

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

EMAIL _____

CLUB or SCHOOL _____

AGE GROUP _____ 2009-2010 RECORD (IF KNOWN) _____

BIRTHDATE _____

Age Group Classification: A wrestler's age on April 3rd will determine his or her age group.

SIGNATURE OF ATHLETE _____ DATE _____

SIGNATURE OF PARENT _____ DATE _____