

# **SECOND ANNUAL** **MUSTANG WRESTLING TOURNAMENT**

**Saturday, March 21, 2015**

**Allen East High School**

**9105 Harding Hwy**

**Harrod, Ohio 45850**

**STARTING TIME 10:00 a.m.**

**Entry Fee \$15.00**

Admission: Adults \$4 Student \$1 Family Pass \$8

**There are no weigh in's.**

**Tournament director will have the right to challenge actual weights listed.**

**Registrations can be mailed or turned in day of tournament.**

**All registrations day of tournament need to be in no later than 8:30am!**

**HOW DOES A TEAM COMPETE:** The coach of a team or club will submit a team roster on Saturday morning, no later than 9:30 am, listing only up to **15** of his best registered wrestlers. (all from the same club)**No mixing of club Rosters. May bring more than one team.**

**RULES:** Modified high school rules, Two 1 & ½ Minute periods,  
No Referee's position, 12 point tech. fall. Sudden death overtime

Medals will be awarded: 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Team Trophy: 1<sup>st</sup>, 2<sup>nd</sup>

Food will be served all day.

**FOR INFORMATION CONTACT:**

**Mike Abbey @ [abbeym@ae.noacsc.org](mailto:abbeym@ae.noacsc.org) Cory Pinks @ [cpcx@live.com](mailto:cpcx@live.com)**

DIVISION	AGE	WEIGHTS
0	6 & under	
1	7 & 8	
2	9 & 10	*weights to be determined
3	11 & 12	
4	13 & 14	
5	15-18	

*Proof of Age required as of March 21, 2015*

**Tournament Director Reserves the right to move Wrestlers up or down.**

**MAIL EARLY ENTRIES TO: Cory Pinks 308 S. Napoleon Rd, Harrod Ohio 45850**

**Make Checks payable to Mustang Wrestling Club Do not mail to school!!!**

**PLEASE PRINT & fill out completely. Incomplete entries will be returned!!!**

Name \_\_\_\_\_ Team Name \_\_\_\_\_

Address \_\_\_\_\_ Birthday \_\_\_\_\_ Age \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

DIVISION \_\_\_\_\_ ACTUAL WEIGHT \_\_\_\_\_

In consideration for acceptance of this application, I hereby waive and release for myself and my heirs and administrators any and all rights and claims for damage against the MUSTANG WRESTLING CLUB, and ALLEN EAST SCHOOLS for any and all injuries suffered by me at this tournament.

**Please indicate wrestling skill, excellent \_\_\_\_\_ good \_\_\_\_\_ beginner \_\_\_\_\_**

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Copy of Entry Form provided by <http://www.ohiotournaments.com>



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