

FAIRVIEW BIDDY WRESTLING TOURNAMENT

Fairview High School 06289 US-127, Sherwood, OH 43556 (not at the elementary this year)

Saturday, February 16th, 2019. STARTING TIME 9:30 a.m. Sharp. Must Check in by 8:30.

Entry Fee \$20.00. Deadline: Wednesday February 13th 8:00 PM.

There are no registrations or weigh ins on Friday or Saturday.

HOW DO I ENTER TOURNAMENT: Fill out entry, list actual weight & mail.

MAIL EARLY ENTRIES TO: 7535 Westerlin Dr. Woodburn, IN 46797. DO NOT MAIL TO THE SCHOOL.

Teams may email your roster to josh.neilson@centrallocal.org.

Tournament director will have the right to challenge actual weights listed. This tournament is open to the first 300 entries received. Get entries in EARLY!!!!

Sending an e-mail will not register you, all registrations must be mailed, unless on a coach's roster. Coach's rosters will be accepted via email.

HOW DOES A TEAM COMPETE: The coach of a team or club submits a list on Saturday morning, no later than 9:00 am, listing only up to twenty of his best registered wrestlers. (all from the same club)No mixing of club Rosters.

RULES: Modified high school rules, Double elimination, Two 1& ½ Minute periods, No Referee's position, 10 point tech. Overtime is sudden death till someone scores.

Awards: Trophies for 1st place, medals for 2nd and 3rd.

Team Trophy: 1st, 2nd, 3rd. FOR INFORMATION CONTACT Tournament Director Josh Neilson at 419 783 8147 or email josh.neilson@centrallocal.org

Age Groups are: 6 and under, 7&8, 9&10, 11&12, 13-15. Weights TBD.

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

Make Checks payable to: Fairview Athletic Department

Name_____

Team Name_____

Address _____ E-mail_____

City_____ State _____ Zip _____

PHONE_____

Age_____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 Fairview High School and associates for any and all injuries suffered by me at this tournament.

Please indicate wrestling skill, excellent_____good_____beginner_____

Parent Signature_____Date_____

Athlete Signature_____Date_____