

Fostoria Bidy Brawl
10th Annual

When: Sunday March 5, 2017

Where: Fostoria High School
1001 Park Avenue to the School
Fostoria, OH 44830

Do Not Mail Registration

Weigh-ins: "NO WALK INS"

All weights must be received by Sat. (4:00pm) March 04, 2017
(limited to the first 250 entries)

Coaches **OR** parents should e-mail weights to. (biddybrawl@aol.com)

Please include:

Name of wrestler:

Age:

Weight:

School:

Phone number: (in case of bracketing problems)

***** We are on the honor system for weights, PLEASE be honest. *****

Wrestlers weights may be spot checked at any time! (3lbs allowance or disqualification)

!!!!!!!!!!!!!!!!!!!!!! We do this so we can start the tournament on time and be done early!!!!!!!!!!!!!!!!!!!!!!

Registration: Please turn registration and entry fee in by 9:30

Wrestling: Wrestling will begin at approximately @ 10:00 a.m.

Admission: All Adults \$5.00 Students Free

Entry: \$15.00 (entry fee turned in by 9:30) Do not mail to the school
*****Make Checks payable to: Fostoria Wrestling *****

Awards: Plaques for 1st, 2nd, 3rd and 4th

Food: Full Concessions will be provided. No coolers will be permitted

| Age/Division | Weight Class |
|--------------|-------------------------------|
| 6 & under | Classes will be |
| 7-8 | determined |
| 9-10 | after all weights are sent in |
| 11-12 | |
| 13-14 | (no high school) |

Modified OHSAA rules. Certified officials. 12 pt. Tech fall. Sudden Death overtime. Two 11/2 minutes periods with neutral start
All wrestlers will wrestle at least 3 matches (this is not Double elimination) Proof of age required.

Questions: Call: **Bryan Lippert @ 419-619-0599** or **Brandon Distel @ 262-212-6865**

In appreciation of your acceptance of my entry, I agree to be legally bound for heirs, my executors, administrators, or myself, waive and release Fostoria High School, any of their affiliates or representatives from any and all claims of right of damages for any injuries sustained by me directly or indirectly by competing in the 2017 Wrestling Tournament.

Please bring form with fee (do not mail to the school)

Name _____ School _____

Date of Birth _____ Age (as of March 05, 2017) _____ Division _____

Address (street) _____ City _____ State _____ Zip _____

Phone # _____

Signature (Parents) _____ Date _____