

The Garrettsville Garfield Spring Open

Presented by OhioQuest Wrestling

Sunday, May 7, 2017

This will be an *OhioQuest* state ranking event, with all place winners scoring points for the rankings at www.ohiotournaments.com. A split start will be used, so check below to see what time your division must weigh in by and starts wrestling. We start on time for all sessions and run quickly!

Tournament Location: Garrettsville Garfield High School, 10233 Ohio 88, Garrettsville, OH.

<u>AGE GROUP</u>	<u>WEIGHT CLASSES</u>	<u>WEIGH-INS</u>	<u>START TIME</u>
Division I: 2010-Later	40,45,50,55,60,70,Hwt	7:30-9:00 a.m.	10:00 a.m.
Division II: 2008-2009	45,50,55,60,65,70,75,85,Hwt	7:30-9:00 a.m.	10:00 a.m.
Division III: 2006-2007	55,60,65,70,75,80,86,93,100,115,Hwt	7:30-9:00 a.m.	10:00 a.m.
Division IV: 2004-2005	65,70,75,80,85,92,100,110,120,130,140,Hwt	7:30-9:00 a.m.	10:00 a.m.
Middle School:	80,86,92,98,104,110,116,122,128,134,142,150,160,172,205,245	7:30-12:00 p.m.	1:00 p.m.
High School:	106,113,120,126,132,138,145,152,160,170,182,195,220,285	7:30-12:00 p.m.	1:00 p.m.
Masters (19 and up)	133,141,149,157,165,174,184,197,220,285	7:30-12:00 p.m.	1:00 p.m.

Awards: Division I, II, III, and IV: Champions Receive an official Champions Sweatshirt! 2nd and 3rd place finishers receive medals.

Middle School and High School age groups. Top Three place 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 Director reserves the right to combine weight classes upon need.

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

Contact Information: Larry Kerr: 567-203-2955

Email: kerr7370@msn.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 Garfield Wrestling Team, Garfield High School, *OhioQuest* Wrestling, Titan Wrestling Club, CFC Athletics, 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.

WRESTLER'S NAME (PRINT LEGIBLY) _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
EMAIL _____ CLUB or SCHOOL _____
AGE GROUP _____ BIRTHDATE _____

Age Group Classification: A wrestler's year of birth will determine his or her age group.

SIGNATURE OF ATHLETE _____ DATE _____
SIGNATURE OF PARENT _____ DATE _____

