

The 8th Annual Green Spring Open

Just south of Akron at the Green High School Gymnasium

Presented by OhioQuest Wrestling

Sunday, April 30, 2017

This will be an *OhioQuest* state ranking event, with all place winners scoring points for the rankings at www.ohiotournaments.com. We have drawn as many as 300 wrestlers in the past, expect a similar great turnout once again this year. 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: Green High School, 1474 Boettler Rd, Green, Ohio.

<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	7:30-12:30 p.m.	1:30 p.m.
High School:	106,113,120,126,132,138,145,152,160,170,182,195,220,285	7:30-12:30 p.m.	1:30 p.m.
Masters (19 and up)	133,141,149,157,165,174,184,197,220,285	7:30-12:30 p.m.	1:30 p.m.

Awards: Division I, II, III, and IV: Top Three 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 Green Wrestling Team, Green High School, *OhioQuest* Wrestling, 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 _____

- Copy of entry form provided by: www.ohiotournaments.com

