



TINORA'S YOUTH WRESTLING TOURNAMENT



Saturday, April 6th 2019

Doors open 7:00 am; Wrestling Starts at 9:00 am

LOCATION: Tinora Elementary
5751 Domersville Rd, Defiance, OH 43512
Defiance, Ohio 43512

SEND INDIVIDUAL ENTRIES TO
Nick Siewert
1209 Valley Forge Drive
Defiance Ohio, 43512

WEIGH-INS: This tournament is pre-registration only. No registrations will be accepted the day of the tournament. There will be no on-site weigh-ins Coaches and Individuals can submit weights via e-mail. Weights may be checked if contested on the day of the tournament. **All registration forms and payment must be mailed by Monday April 1st to be accepted into the tournament. Teams and Coaches may email entries to tinorawrestlingparents@gmail.com and then pay the morning of the tournament. Any questions please call 419-956-1560**

ELIGIBILITY: Age as April 6th 2019. **Bring birth certificate in case of challenge.

RULES: Modified High School Rules. Two 1 ½ minute periods, All periods start on feet in neutral position, out of bounds calls or lack of activity will start on feet, Sudden Victory in OT, 12 point tech fall.

AWARDS: Individual: 1st: trophy, 2nd & 3rd: medal; **Team:** 1st and 2nd place trophy.

ADMISSION: Adults: \$4.00, Students: \$2.00

CONCESSIONS: Hot food and cold drinks will be available.

ENTRY FEE: \$20.00 per wrestler

ENTRIES: INDIVIDUAL ENTRIES NEED TO BE MAILED TO TOURNAMENT DIRECTOR NO LATER THEN MONDAY APRIL 1st. TEAMS CAN EMAIL THEIR ROSTERS TO THE TOURNAMENT DIRECTOR BY APRIL 4TH, TOURNAMENT DIRECTOR WILL E-MAIL BACK TO VERIFY RECEPTION OF ENTRY. UPON ARRIVING AT TINORA THE MORNING OF TEAMS AND WRESTLERS WILL NEED TO CHECK IN AT REGISTRATION DESK, TURN IN SIGNED RELEASE OF LIABILITY AND PAY ENTRY FEE.

MAKE CHECKS PAYABLE TO: Team Big Horn

| DIVISION | AGE | WEIGHT CLASS |
|----------|-----------|--|
| 0 | 6 & under | WEIGHT CLASSES TO BE DETERMINED DAY OF TOURNAMENT, TOURNAMENT DIRECTOR RESERVES RIGHT TO MOVE WRESTLERS UP AND DOWN IN AGE AND WEIGHT DIVISIONS. |
| I | 7 & 8 | |
| II | 9 & 10 | |
| III | 11 & 12 | |
| IV | 13 - 14 | |
| V | 15-18 | |
| VI | Unlimited | |

Remove bottom portion and return with entry fee

Name: _____ Date of Birth: ____/____/____

Address: _____ Phone: _____

Age as of 4/6/19: _____ Division: _____ Weight: _____

Club/Team: _____ (Max 20 participants per team to compete for team trophy)

In consideration of your acceptance of my entry, my legal heirs and I, do hereby waive and release and forever discharge any and all right and claims for damages which we may have, or which may occur against the sponsors of this tournament (Tinora High School Wrestling Team & Tinora Athletic Boosters), Tinora High School, Tinora Board of Education and its representatives from any and all damages which may be sustained and suffered by the athletes in connection with, directly or indirectly, training for, traveling to and from, and participation in this tournament. I understand that should a health emergency arise, I will be notified, but if I cannot be reached by phone, such emergency medical treatment as deemed necessary by competent personnel shall be given, with my permission waived. I understand that all persons treated by EMS will be transported unless a waiver is signed at the time of treatment. **ALL ENTRIES MUST BE SIGNED BY PARTICIPANT. ALL PARTICIPANT ENTRIES MUST HAVE PARENT OR GUARDIAN SIGNATURE.**

Wrestlers Signature: _____ Date: _____

Parent/Guardian Signature: _____ Cell Phone: _____