

7th Annual Archer Open

(Limited to first 300 wrestlers)

Tournament Director – Jeremy Kosch

SATURDAY APRIL 4, 2015 AT 10:00 AM FOR ALL DIVISIONS

Antwerp High School – 303 South Harrmann Rd., Antwerp, OH 45813

Do NOT mail entries to school (see below for mailing information)

THIS IS A TOURNAMENT OF CHAMPIONS QUALIFIER

Entry Fee \$15.00 - MUST be postmarked by March 30, 2015.

Make checks payable to **Antwerp Wrestling Club**

**THERE WILL BE NO ENTRIES ACCEPTED AFTER MARCH 30TH UNLESS POSTMARKED BY THE 30TH OR
UNLESS YOU ARE ON A COACH'S EMAILED ROSTER**

No registrations or weigh ins on Friday or Saturday – Call in weights only

Sending an email will NOT register you. All registrations must be mailed with entry fee unless on a coach's roster. Coaches' rosters will be accepted via email until 12 noon Thursday, April 2, 2015.

RULES: Modified High School rules. 2 – 1 ½ minute periods. No referee's position. 12 point tech fall. Sudden victory overtime. This is a round robin tournament. Most wrestlers will have up to 3 matches.

TEAM COMPETITION: Coaches will submit a team roster on Saturday morning no later than 10:00 AM, listing up to 20 wrestlers. No mixing of club rosters and wrestlers may only be listed on one roster.

AWARDS: Medals will be awarded for 1st, 2nd, 3rd, and 4th place **TEAM TROPHIES:** 1st, 2nd, and 3rd place.

SPECTATOR ADMISSION: Adults \$4 Students \$2

CONTACT INFO: Mail entries to Jeremy Kosch, 410 East Canal Street, Antwerp, OH 45813.

Phone number: (419)506-0211. Email: j_kosch@yahoo.com.

Division	Age	Weight
1	5 & under	
2	6 & 7	
3	8 & 9	
4	10 & 11	Weights will be determined after registration for all divisions
5	12 & 13	
6	14 & 15	
7	16 – 18	
8	Old timers	

* Tournament director reserves the right to move wrestlers up or down and challenge actual weights listed on entry form.

Name _____ **Team Name** _____

Address _____ **City** _____ **State** ____ **Zip** _____

Birthday _____ **Age** _____ **Phone #** _____

Division _____ **Actual Weight** _____

Please indicate wrestling skill : Beginner _____ **Good** _____ **Excellent** _____

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 Antwerp Wrestling Club and Antwerp Local School for any and all injuries suffered by me at this tournament.

Parent Signature _____ **Date** _____

Athlete Signature _____ **Date** _____