



# Warren Warrior Open

## \*An OAC Sectional & Novice Tournament\*

Saturday, January 16, 2016

A+

Tournament will be ran in 3 sessions. **We will start on time for all sessions and run quickly!!!**

**Location:** Warren High School, 139 Warrior Drive , Vincent, OH 45784

**Age Group Classification:** A wrestler's age AS OF December 31, 2015 will determine his or her age group.

| DIV (Birth Year)      | WEIGHT CLASSES                                                                                                                              | WEIGH-IN        | START TIME |
|-----------------------|---------------------------------------------------------------------------------------------------------------------------------------------|-----------------|------------|
| NOVICE D1: 2009-LATER | To be eligible for the Novice division a wrestler must have 3 or less years' experience and has not competed in the OAC State               | 7:00-9:00 a.m.  | 10:00 a.m. |
| NOVICE D2: 2007-2008  |                                                                                                                                             | 7:00-9:00 a.m.  | 10:00 a.m. |
| NOVICE D3: 2005-2006  |                                                                                                                                             | 7:00-9:00 a.m.  | 10:00 a.m. |
| NOVICE D4: 2003-2004  |                                                                                                                                             | 7:00-9:00 a.m.  | 10:00 a.m. |
| DI: 2009-LATER        | WEIGHT CLASSES WILL BE DETERMINED AFTER WEIGH-INS. NO WRESTLER WILL WRESTLE ANYONE MORE THAN 13% HEAVIER WITHOUT PARENT OR COACH PERMISSION | 7:00-11:00 a.m. | 12:00 p.m. |
| D2: 2007-2008         |                                                                                                                                             | 7:00-1:00 p.m.  | 2:00 p.m.  |
| D3: 2005-2006         |                                                                                                                                             | 7:00-11:00 a.m. | 12:00 p.m. |
| D4: 2003-2004         |                                                                                                                                             | 7:00-1:00 p.m.  | 2:00 p.m.  |

This year top 4 Novice placers in each weight class earn computer points for seeding at Novice State. These points also count toward Novice State Ranking and end of season Novice awards. **Wrestlers must register online to receive points.**

**Awards:** Top two place finishers in D1-D4 receive trophies. 3<sup>rd</sup>-4<sup>th</sup> in D1-D4 receive medals.  
D1-D4 Champions also receive bracket. Top 4 finishers in NOVICE DIVISIONS, D5-D6 receive medals.

**Entry Fee:** \$20 at the time of weigh-ins. Wrestlers can enter 2<sup>nd</sup> Division for \$10. **NOVICE DIVISION ONLY = \$15.**

**Register Online or On Site.** **To receive District/State Seed points and State Computer Ranking Points you MUST register online at <http://register.ohioathletics.com>**

**Match Length:** 3 -1 minute periods (Choice for 2<sup>nd</sup> & 3<sup>rd</sup> periods). 10 pt TECH FALL. "Sudden Victory" OT 1<sup>st</sup> point scored wins, no time limit. NOVICE MATCHES = ALL RESTARTS NEUTRAL.

**Rules:** Modified Scholastic Rules will be used for all divisions. Tournament will be double elimination or round robin.  
Tournament Director reserves the right to combine weight classes upon need.

**Admission:** \$5 Adult, \$3 Student or \$10 Family

**Concessions:** Will be served all day, including a full breakfast. No coolers or crockpots or carry-ins.

**Contact Information:** Ric Roe: [ricroe7408911970@gmail.com](mailto:ricroe7408911970@gmail.com), Phone/Text: 740-891-1970

In appreciation of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors, and administrators, waive and release Warren High School, Warren Local Schools, the Ohio Athletic Committee and its officers, A+ Sportswear, tournament 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.

NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDATE : \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

AGE DIVISION \_\_\_\_\_ WT CLASS \_\_\_\_\_

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SIGNATURE OF ATHLETE \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PARENT \_\_\_\_\_ DATE \_\_\_\_\_