

The 8th Annual **Columbus Bishop Hartley Open**

Saturday, February 13, 2016

Please Note: Youth Wrestlers- This tournament contains both an "Open" Youth Division and a "Novice" Youth Division (for 1st & 2nd year wrestlers). If you began wrestling before Oct. 1, 2014, you are not eligible for the Novice Division and must compete in the "Open" Youth Division.

Tournament Location: Bishop Hartley High School, 1285 Zettler Rd, Columbus, Ohio.

AGE GROUP	WEIGHT CLASSES	WEIGH-IN	START TIME
5-6 Open	40,45,50,55,60,70,Hwt	7:00-8:30 a.m.	9:30 a.m.
7-8 Open	45,50,55,60,65,70,75,85,Hwt	7:00-10:30 a.m.	12:00 p.m.
9-10 Open	55,60,65,70,75,80,86,93,100,115,Hwt	7:00-10:30 a.m.	12:00 p.m.
11-12 Open	65,70,75,80,85,92,100,110,125,140,Hwt	7:00-10:30 a.m.	12:00 p.m.
13-14 Open	80,86,92,98,104,110,116,122,134,142,150,172,205,Hwt	7:00-10:30 a.m.	12:00 p.m.

"NOVICE" DIVISION TOURNAMENT (FIRST AND SECOND YEAR WRESTLERS)

AGE GROUP	WEIGHT CLASSES	WEIGH-IN	START TIME
7-8 NOVICE	45,50,55,60,65,70,75,85,Hwt	7:00-8:30 a.m.	9:30 a.m.
9-10 NOVICE	55,60,65,70,75,80,86,93,100,115,Hwt	7:00-8:30 a.m.	9:30 a.m.
11-12 NOVICE	65,70,75,80,85,92,100,110,125,140,Hwt	7:00-8:30 a.m.	9:30 a.m.

Awards: Top 3 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. Sudden death overtime will be used in case of a tie. Double Elimination or Pools based on number of entrants. Tournament Director reserves the right to combine weight classes upon need.

Concessions: Will be served all day.

Contact Information: Paul Petrella: 614-751-1315

Email: paulpetrella@ymail.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 Bishop Hartley Wrestling Team, Bishop Hartley High School, 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 _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
EMAIL _____ CLUB or SCHOOL _____
AGE GROUP _____ 2015-2016 RECORD (IF KNOWN) _____
BIRTHDATE _____

Age Group Classification: A wrestler's age on February 13th will determine his or her age group.

SIGNATURE OF ATHLETE _____ DATE _____

SIGNATURE OF PARENT _____ DATE _____