

LAKOTA YOUTH WRESTLING

OPEN TOURNAMENT

Lakota High School
5200 Co. Rd. 13, Kansas, OH 44841
Sunday, December 18, 2016

Limited to the first 300 wrestlers

Weigh-ins: E-mail/Call in weights by HEAD COACH ONLY

- (must be received by Friday, December 16, 2016 – No Weigh-ins day of tournament)
- Please e-mail wrestlers name, age, weight & wrestling club to: biddlebarn@live.com
- All payments due for ALL entries at time of check-in.
- All wrestlers hands must be marked when they arrive at the tournament.
- TWO HALF MATS FOR DIVISION I (same mat all day)
- THREE FULL MATS FOR DIVISIONS II – IV (same mat all day)

Wrestling Begins: Approximately at 10:00am

Doors open at 7:00am. ALL wrestlers NEED to be checked in by 9:00am.

Wrestlers not checked in by 9:00am, will be removed from the bracket (no refund).

Early Entry Fee: \$15.00 per wrestler if registration received by Friday, December 9, 2016

\$20.00 per wrestler after December 9, 2016

(Make checks payable to “CAPE”)

Eligibility: Age as of December 18, 2016

DIVISION I: 6 and under

DIVISION II: 7&8

DIVISION III: 9&10

DIVISION IV: 11&12

***Weight classes will be determined by entries received

***Singlet OR Shorts/T-Shirt only

***Bring Birth Certificate in case of challenge

Rules: Modified High School Rules, all round robin/pool classes, Three- 1 minute periods, All periods start on feet, out of bounds calls or lack of activity will start on feet, Sudden Death in OT, 12 point tech fall. **Wrestlers may only wrestle in one weight class.**

Contact Information: Chad Biddle at biddlebarn@live.com OR 419-343-9603

Awards: 1st, 2nd, 3rd, and 4th place Trophies in each weight class

1st, 2nd, and 3rd place Team Trophies

Admission: Adults- \$5.00, Students - \$2.00, Family Pass- \$10.00

Concessions: Hot and Cold Food will be served. NO Coolers.

Name: _____ Club/Team _____

Address: _____ Date of Birth: ____/____/____

Age as of 12/21/14: _____ Division: _____ Weight: _____ Phone: _____

In consideration of your acceptance of my entry, I and my legal heirs, executors and administrators, do hereby waive and release the Lakota Wrestling Club, Lakota High School, Board of Education, Tournament Committees, staff, officials, and sponsors from any and all claims of right to damage for injuries or losses suffered by me directly or indirectly to or from competing in or attending the said wrestling tournament.

Date: _____ Wrestlers Signature: _____

Parent Signature (Required): _____

(Make checks payable to “CAPE”)

Copy of Entry Form at www.ohiotournaments.com
with permission of Lakota Wrestling Club per Chad Biddle