

THE 8th Annual Bulldog Fall Open

Just south of Akron at the Green High School Gymnasium

Sunday, November 9, 2014

Five full-sized mats will run all day to ensure the tournament is completed as quickly as possible. Wrestling will begin at 10:00 a.m. sharp! All sessions will start on time and run quickly. This Tournament typically draws over 300 wrestlers, so come prepared to wrestle!

Tournament Location: Green High School, 1474 Boettler Rd, Green, Ohio.

<u>AGE GROUP</u>	<u>WEIGHT CLASSES</u>	<u>WEIGH-INS</u>	<u>START TIME</u>
5-6	40,45,50,55,60,70,Hwt	7:30-9:00 a.m.	10:00 a.m.
7-8	45,50,55,60,65,70,75,85,Hwt	7:30-9:00 a.m.	10:00 a.m.
9-10	55,60,65,70,75,80,86,93,100,115,Hwt	7:30-9:00 a.m.	10:00 a.m.
11-12	65,70,75,80,85,92,100,110,120,130,140,Hwt	7:30-9:00 a.m.	10:00 a.m.
13-14	80,85,90,95,100,105,112,119,126,132,138,145,160,180,Hwt	7:30-12:30 p.m.	1:30 p.m.
15-19 (no grads!)	106,113,120,126,132,138,145,152,160,170,182,195,220,285	7:30-12:30 p.m.	1:30 p.m.
Masters (19 and up)	133,141,149,157,165,174,184,197,215,285	7:30-12:30 p.m.	1:30 p.m.

Awards: 12 and under: Top Three place finishers receive Deluxe Trophies.

13-14, 15-19, and Masters age groups: Top Three place finishers receive medals. To check out our trophies, go to: <https://www.facebook.com/profile.php?id=100008301346678>

Entry Fee: \$20, at the time of weigh-ins. No pre-registrations.

Rules: Modified Scholastic Rules will be used for all divisions. All periods start from the neutral position. All restarts are from the neutral position. Sudden death overtime will be used in case of a tie. Tournament Director reserves the right to combine weight classes upon need. Only OHSAA Certified Officials will be used!

Concessions: Will be served all day, including a full breakfast.

Contact Information: Larry Kerr: 567-203-2955

Email: kerr7370@msn.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 Green Wrestling Team, Green 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 _____ BIRTHDATE _____

Age Group Classification: A wrestler's age on date of tournament will determine his or her age group.

SIGNATURE OF ATHLETE _____ DATE _____

SIGNATURE OF PARENT _____ DATE _____

- **Copy of Entry Form provided by www.ohiotournaments.com**