



# Bexley Summer Open

*Saturday, June 17, 2017*



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

**Location:** Bexley High School, 326 S Cassingham Road, Bexley, OH 43209

*AGE DIVISION IS BASED ON AGE ON DAY OF TOURNAMENT*

<b>DIV</b>	<b>WEIGHT CLASSES</b>	<b>WEIGH-IN</b>	<b>START TIME</b>
D1: 6 & UNDER	WEIGHT CLASSES WILL BE DETERMINED AFTER	7:00-9:00 a.m.	10:00 a.m.
D2: 7-8	WEIGH-IN. NO WRESTLER WILL WRESTLE	7:00-11:00 a.m.	12:00 p.m.
D3: 9-10	ANYONE MORE THAN 10% HEAVIER	7:00-9:00 a.m.	10:00 a.m.
D4: 11-12	WITHOUT PARENT OR COACH PERMISSION	7:00-11:00 a.m.	12:00 p.m.
D5: JUNIOR HIGH		7:00-11:00 p.m.	12:00 p.m.
D6: HIGH SCHOOL (NO GRADUATES)		7:00-1:00 p.m.	2:00 p.m.
D7: MASTER'S (18+)		7:00-1:00 p.m.	2:00 p.m.

**Awards:** Top two place finishers in D1-D4 receive trophies. 3<sup>rd</sup>-4<sup>th</sup> in D1-D4 receive medals. Top 3 finishers in D5-D7 receive medals.

**Entry Fee:** \$20 at the time of weigh-ins. 2<sup>nd</sup> Division = \$10.

**Match Length:** 3 -1 minute periods. 10 pt TECH FALL. "Sudden Victory" OT 1<sup>st</sup> point scored wins, no time limit.

**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. 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 the Bexley High School, Bexley City Schools, 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** \_\_\_\_\_

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

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