

THE JACKSON LITTLE WRESTLERS

ANNUAL IRON CITY OPEN

YOUTH WRESTLING TOURNAMENT

Date: January 28, 2018

Location: Jackson High School, 500 Vaughn Street, Jackson, Ohio

Entry Fee: \$ 15 per wrestler per weight class / age group if registered by 10pm Thursday, January 25th 2018
\$20 per weight class / age group day of event

Age groups: **Tots-6&under** **Bantams-7&8** **Midgets-9&10** **Juniors-11&12**

Weigh- Ins: Weigh ins are to be conducted day of the event and weight classes will be determined after weigh ins are complete. When needed a 13% rule will be in effect from the lightest to the heaviest in the weight class and will not be exceeded without parents or coaches permission.

Weigh - ins: 7- 9am

Wrestling: 10 am

Entries by: **Mail to:** Jackson Little Wrestlers, C/O Mike Greene, 702 Keystone Furnace Road, Jackson, Oh 45640.
Text to: 1-740-418-7121 **Email to:** jacksonlittlewrestlers@yahoo.com

Rules: Matches are 3 – 1 minute periods, scholastic rules apply, sudden victory overtime. Limit of 2 entries per wrestler. If entered in 2 weight classes, the wrestler must be ready to wrestle when called.

Admission: \$2 individual - \$5 family - children 3 and under are free.

Concessions: Concessions will be available. There are no crock pots or other electrical devices permitted in Jackson High School. The cafeteria area will be available as **water is the only item permitted inside the gymnasium**. The varsity wrestling locker room will be available for changing, showering, etc.

Awards: Individual Awards for 1st thru 4th place.

*******Entry Form*******

Age : _____ Weight : _____ DOB: _____*

Name: _____ Phone #: _____

Address: _____ City: _____ State: _____

Please enter my child in the Iron City Open Youth Wrestling Tournament. In consideration of your acceptance of this entry, I extend to be legally bound for myself, my heirs, and assign and waive all claims to damages which I might have against sponsors of the tournament, Jackson City Schools, Jackson High School, and the Jackson Little Wrestlers, Individually and collectively. My legal signature below indicates that I have read, understand and accept the terms of this agreement fully and without reservation.

Parent/Legal Guardian

Date

Wrestler

Date

**Proof of age must be provided upon request.*