

## FIGHT ON THE FIELD



## Saturday June 10, 2023

Tournament Location: Philo Football Field, 360 Cedar Street, Duncan Falls, OH 43734

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

DIVISION	WEIGHT CLASSES	<b>WEIGH-IN</b>	WRESTLE
D1: 6 & UNDER	WEIGHT CLASSES WILL BE DETERMINED AFTER	1:00-3:00 p.m.	4:00 p.m.
D2: 7-8	WEIGH-INS. NO WRESTLER WILL WRESTLE	1:00-3:00 p.m.	4:00 p.m.
D3: 9-10	ANYONE MORE THAN 13% HEAVIER	1:00-3:00 p.m.	4:00 p.m.
D4: 11-12	WITHOUT PARENT OR COACH PERMISSION	1:00-3:00 p.m.	4:00 p.m.
D5: JUNIOR HIGH		1:00-3:00 p.m.	4:00 p.m.
D6: HIGH SCHOOL	_	1:00-3:00 p.m.	4:00 p.m.

Registration: Pre-Register on <a href="https://aplustournaments.square.site/">https://aplustournaments.square.site/</a> by Friday June 9th at 8:59

**pm** OR walk-in registration at the tournament

Entry Fee: Preregister on A+ site by Friday June 9th at 8:59 pm = \$25 entry fee.

Walk in registration at  $\overline{\text{Weigh-ins}} = \$30 \text{ entry fee}$ 

Awards: Free BA Sunglasses for all wrestlers. Trophies for 1<sup>st</sup> and 2<sup>nd</sup>. Medals for 3<sup>rd</sup>-4<sup>th</sup>

**Match Length:** 3 -1 minute periods. 10 pt TECH FALL. OT 1 minute sudden victory if no points scored / 30 sec. ride-out, flip for choice.

**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:** 13 & Over = \$5 - 12 & Under = FREE

Contact Information: Ric Roe: ricroe7408911970@gmail.com Phone/Text: 740-891-1970

For Details & Updates: <a href="https://aplustournaments.square.site/">https://aplustournaments.square.site/</a>

In appreciation of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors, and administers, waive and release the Philo High School, Franklin Local 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 :
PHONE:	_E-MAIL _		
DIVISION		WT CLASS	
SIGNATURE OF ATHLETE			DATE
SIGNATURE OF PARENT			DATE