



45th ANNUAL BEAR COUNTRY WRESTLING TOURNAMENT

Organized by the Mercer County Athletic Boosters



Saturday, March 15, 2025 at Mercer County High School

Weigh-Ins: Session I **7:00-8:00 AM** for Mini, Pee-Wee, and Bantam divisions
Session II **10:30-11:30 AM** for Novice, Junior, and Senior divisions

Start time: Wrestling will begin for Session I as soon as brackets are ready. Session II will begin once brackets are completed and Session I has completed.

SESSION I DIVISIONS:

Mini (Pre-K & Kindergarten)
Pee-Wee (1st & 2nd Grade)
Bantam (3rd & 4th Grade)

SESSION II DIVISIONS:

Novice (5th & 6th Grade)
Junior (7th & 8th Grade)
Senior (High School - NO SENIORS)

APPAREL PRE-ORDER:

Must order by 2/27/25



REGISTRATION FEE:

Mail in Pre-registration - \$20, postmarked by 3/7/25
Google Form Pre-registration - \$20, completed by 3/10/25
Walk-in registration - \$25 paid at the door

PAYMENT: Cash, check, or Venmo

Checks made payable to MCAB
Venmo: MercerCo-Boosters (include wrestler's name)
All Google Form registrations will require Venmo payment

RULES/INFORMATION:

- Folkstyle (high school rules) - No jeans or loose clothing
- Wrestlers will be grouped into 4-man round robin when feasible based on their weight and division
- All wrestlers will receive an award
- 1 coaches pass will be provided per wrestler
- Concessions will be available in the cafeteria throughout the day, with breakfast items 7-10 am
- Spectator Fees: Adults \$4, students \$2

MAIL IN REGISTRATION ADDRESS:

Mercer County Athletic Boosters
c/o Dustin Murray
1500 S. College Ave.
Aledo, IL 61231

GOOGLE FORMS REGISTRATION QR CODE:

Reminder If you pre-register through the Google Form you MUST send payment via Venmo. If payment is not received your wrestler will not be pre-registered.



FOR MORE INFORMATION: Dustin Murray (309) 582- 4662 or Jeremy Finch (309) 371-8498

NAME _____ GRADE _____ AGE _____ BIRTHDATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

SCHOOL/CLUB _____

In consideration for your acceptance of my entry, my parents, intending to be legally bound, waive and release the MERCER COUNTY SCHOOL DISTRICT #404, TOURNAMENT REPRESENTATIVES, AND MEMBERS from any and all claims or rights to damages for injuries or losses suffered by me directly or indirectly in training for, traveling to and from, or competing in or attending this tournament. Participants must provide their own medical insurance and proof of birth by parent's signature.

PARENT SIGNATURE _____ PHONE NUMBER _____