(Limited to the first 300 wrestlers)

**SUNDAY, January 19th, 2025**

**Check In**: 9:30-10:30 **Start** **Time**: 11:00 AM

\*PART OF THE GMC TOURNAMENT SERIES – ANTWERP, AYERSVILLE, EDGERTON, FAIRVIEW, TINORA, & PAULDING TOURNAMENTS\*

**FAIRVIEW HIGH SCHOOL**- 06289 US 127 Sherwood, OH 43556

**ENTRY FEE-** $25.00 - Make checks payable to Fairview Athletic Department

**Mail Early Entries To:**

Fairview High School ATTN Luke Case, 06289 US 127 Sherwood, OH 43556

Phone (614) 746-8445

\*Please be postmarked by January 13, 2025 to ensure delivery by Thursday, January 16, 2025\*

Unless on a team, an email will not enter a wrestler, this registration MUST be mailed in.

**Payments can be accepted by mail with registration or day of event, either individually or by team with a roster.**

Email rosters and any questions to: Luke.Case@CentralLocal.org

No registrations or weigh ins will be accepted Friday or Saturday

**RULES:** Modified High School rules. 2 – 1 ½ minute periods. No referee’s position. 10 point tech fall. Sudden victory overtime. This is a round robin tournament.

**TEAM COMPETITION**: Coaches may submit a team roster with names and weights until Thursday, January 16 at 9:00 p.m. No mixing of club rosters and wrestlers may only be listed one time on one roster. For teams competing, these forms must be handed in with payment before or on day of tournament.

**AWARDS:** 1st, 2nd, 3rd and 4th place **TEAM TROPHIES:** 1st, 2nd and 3rd place

**SPECTATOR ADMISSION:** Adults $5 Children 12 and under free

Division 1: 6 & under Division 2: 7 & 8 Division 3: 9 & 10 Division 4:11-13

**NO 7TH or 8TH GRADE WRESTLERS**

 \*Weight classes will be determined after registration\*

Tournament director reserves the right to move wrestlers up or down and challenge actual weights listed on entry form.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Team Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthday \_\_\_\_\_\_\_\_\_\_\_\_\_ Age \_\_\_\_\_\_\_ Division \_\_\_\_\_\_\_ Actual Weight \_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State \_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_ Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-shirt size (circle one): YS YM YL XS S M L

Please indicate wrestling skill : Beginner \_\_\_\_\_\_\_\_\_ Good \_\_\_\_\_\_ Excellent \_\_\_\_\_\_\_

In consideration for acceptance of this application, I hereby waive and release for myself and my heirs and administrators any and all rights and claims for damage against the Fairview High School and associates for any and all injuries suffered by me at this tournament.

 Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_