

Alexander Spartan Youth Open

Open & Novice Tournament

Sunday January 5, 2025

Location: Alexander High School, 6091 Ayers Road, Albany, Ohio 45701

SESSION 1:

NOVICE D1: 2018-Later

NOVICE D2: 2016-2017

NOVICE D3: 2014-2015

NOVICE D4: August 1, 2011-2013

NOVICE DIVISION ELIGIBILITY:

- 3 years or less experience
- Has NOT competed in- OAC State Tournament, PJW State Tournament or WVSSAC State Tournament

WEIGH IN:

7:30-8:45 AM

START TIME:

10:00AM

SESSION 2:

OPEN D1: 2018- LATER *Weight classes will be determined after weigh-ins

WEIGH-IN:

OPEN D2: 2016-2017 *NO wrestler will wrestle anyone more than 13% heavier

7:30-11:30 AM

OPEN D3: 2014-2015 without parent or coach permission

START TIME:

OPEN D4: August 1, 2011-2013

1:00 PM

GIRLS D1: 2015- LATER

GIRLS D2: August 1, 2011-2015

Awards: Top four place finishers in each weight class receive Metals/ Top three Teams receive Awards

Entry Fee: \$25 per wrestler/ May enter 2 divisions/ 2nd division is \$15

Match Length: (3) 1-minute periods (choice for 2nd & 3rd periods); 10pt TECH FALL; OT 1-minute sudden victory, if no points scored=30 second tie breaker (choice to wrestler scoring first) if 0-0 =flip. NOVICE MATCHES= RESTARTS NEUTRAL

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 if necessary

Admission: \$5 Adult/ \$3 student

Concession: serving all day including breakfast. NO coolers. NO crockpots, or carry-ins

Contact Information: James Allen jma3504bolt@yahoo.com 740-856-8273 or Terry Young terryyoung298@gmail.com

In appreciation of your acceptance of my entry, I agree to be legally bound for myself, my heirs, executors, and administrators, waive and release Alexander High School, tournament officials, tournament directors, workers, and all representatives from any and all claims of right to damages for any injury suffered by me or my child directly or indirectly as a result of competing at this tournament.

NAME (print): _____

AGE: _____ **BIRTHDATE:** _____ **TEAM NAME:** _____

CIRCLE DIVISION(S): **NOVICE:** D1 D2 D3 D4 **OPEN:** D1 D2 D3 D4 **GIRLS:** D1 D2

SIGNATURE OF ATHLETE _____

SIGNATURE OF PARENT _____