

11th Annual Holiday Havoc
Sunday, December 10th, 2023
Jackson High School, 500 Vaughn Street, Jackson, Ohio

NOVICE (Weigh In 7:30am – 8:45am Wrestle at 10am)

Must have less than 3 years' experience and have not competed in the ANY State Tournament

Division	Age as of 12/9/23	Weigh In	Wrestling
1	Under 6	7:30-8:45am	10am
2	7-8	7:30-8:45am	10am
3	9-10	7:30-8:45am	10am
4	11-12	7:30-8:45am	10am

OPEN (Weigh In 7:30am – 10:45am – Wrestle at approximately 12pm)

Division	Age as of 12/9/23	Weigh In	Wrestling (approximately)
1	Under 6	7:30-10:45am	12pm
2	7-8	7:30-10:45am	12pm
3	9-10	7:30-10:45am	12pm
4	11-12	7:30-10:45am	12pm

Entry Fee: \$20 pre-registration for one division/\$35 for both. \$25/\$40 walk In Day of Event.
 Payable at Weigh In. All wrestlers must weigh in.

Registration: Email this form to boliver2007@roadrunner.com
 Pre-registration deadline is 8pm, Friday, December 8, 2023

Awards: Medals for top 3 in each division

Match Length: 3-1 minute periods. All neutral starting positions. 10 point Tech Fall, Overtime is 1 minute Sudden Victory followed by a 30 second tie breaker if necessary. We will be using 4 mats and a Medina Board.

Weight Classes: Weight Classes will be established once everyone weighs in. Wrestlers will be grouped in pools based on weight and division with no more than a 13% weight differential without permission from a coach or parent.

MODIFIED SCHOLASTIC RULES

Admission: Adult \$5 Student \$3 Family \$10

Concessions: Concessions will be available. No Crock Pots or electrical devices permitted.
 No food is permitted in the gym – water only.

Contact Information: Submit all inquiries to boliver2007@roadrunner.com

 By submitting this entry, I agree to be legally bound for myself, my heirs, my executors, and administrators, waive and release Jackson High School, Jackson City Schools, its administrators, tournament officials, tournament directors, workers and all representatives from any and all claims to rights of damages for any injury suffered by me directly or indirectly as a result of participation in this tournament.

Please Select: Novice Open Both

Name: _____ **DOB:** _____ **Age:** _____ **Division:** _____

Team: _____ **Phone:** _____ **Email:** _____

Signature of Parent: _____ **Date:** _____