23rd Annual BAGUBA Folkstyle Open

Date: Saturday June 17th 2017

Location Grayslake Central High School 400 N. Lake Street Grayslake IL 60030

WEIGH-INS: 7:00-8:00 AM late comers will not wrestle. Wrestling Starts 9:00 AM

DIVISIONS: K-2nd grade

 3rd-4th grade

 5th-6th grade

 7th-8th grade

 9th-10th grade

 11th-12th grade

 Open Division

In all divisions there will be a four man round robin and blocked weight classes.

There will be two -2minute periods, both starting from the neutral position.

AWARDS: All divisions-Custom Medals

ENTRY FEE: $20 at door , spectator admission TBD

NO REFUNDS $15 pre-registered if received before June 1

 Make check payable to: Grayslake Central Wrestling

INFORMATION: Call Jim Mazzetta at 847-986-3300 ext. 3600

INSURANCE: Each wrestler must provide their own insurance and sign waiver

NO PHONE REGISTRATION

OPEN TO THE FIRST 350 ENTRANTS

FOOD AND REFRESHMENTS WILL BE AVAILABLE THROUGHOUT THE DAY

Mail Entry Form To:

Grayslake Central Wrestling

Attention: Matt Joseph

400 N. Lake Street

Grayslake, IL 60030

 BAGUBA OPEN ENTRY FORM

 ENTRY FORM MUST BE SIGNED BY PARENT OR GUARDIAN

Waiver: In consideration of your acceptance of this entry, I, intending to be legally bound hereby, for myself, my heirs, executors and administrators, waive and release Grayslake Central High School, their agents, committees and members from any or all claims on rights to damage for injuries or losses suffered by me directly or indirectly in training, or traveling to or from competing in or attending the 23rd Annual Baguba Folkstyle Open. Make sure you fill out the entire entry form.

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade \_\_\_\_\_\_ Gender \_\_ Birthdate \_\_\_\_\_\_\_\_\_ Approx. Weight \_\_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Carrier \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Policy #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_