17th Annual Trinity Odd-Age **** OPEN WRESTLING TOURNAMENT****

Date:	Su	Sunday, February 2 , 2025					
Location:	Trinity Area SR High School, 231 Park Ave. Washington, PA 15301 (Gym Entrance at rear of School)						
Start Time:		30 AM – 5 & Under, 9 30 PM – 7 & Under, 11	9 & Under and Jr High 11 & Under				
Eligibility: wrestler		ge Division determined ust also provide proof		ge as of 12/31/24. Proof of age will be required if challenged; challenging e.			
Rules:	Modified PIAA Rules. Double elimination format with true second. All wrestlers must make weight. This Silent Tournament. Wrestlers must wrestle to receive an award. Decision of Referees and Tournament final. All matches will be (1,1,1) except junior High(1:30, 1:30, 1:30). ALL consolation matches are (1,1,1) All overtime 1:00 with :30 rideout. Brackets may be combined or split upon the tournam director's discretion .					Referees and Tournament Directoronsolation matches	
Weigh-Ins:	2-1-25 6:00PM-8:00PM All Divisions (Auxiliary Gym) 2-2-25 6:30AM-7:30 AM All Divisions 2-2-25 12:00 PM-1:00PM 7 & Under, 11 & Under,						
Entry:	Ja	Entry Fee is \$40 Online Registration Only. Entries must be received by 10:00 PM Thursday January 30, 2025. NO Exceptions. No Walk in Registration. 300 wrestler limit. Double entry is permitted i different age divisions for two entry fees. For questions contact Paul Reihner- email- reihnerpe@gmail.com .					
Admission:	Adults \$10.00 Concessions and Hot food will be available all day including breakfast. Use designated eating areas only. NO FOOD OR DRINK IS PERMITTED IN GYMNASIUMS. Trinity Area School District is tobacco free. N Smoking or tobacco on school grounds.						
Awards:	Сι	stom Medals for top 4	place winners. Ho	oodies for chan	npions.		
17 th Annual	Trinity 0	dd-Age Tournan	nent		Sunday	February 2 , 2025	
Circle Division	5 & Under	35, 40, 45, 50,	55, 60, 65, 75, 85,	100 Max			
And weight class	7 & Under	Under 45, 50, 55, 60, 65, 70, 75, 80, 90, 100, 120 Max					
You Want To	9 & Under	, , , , , , , , , , , , , , , , , , , ,					
Enter & Write Below To Confirm.	11 & Unde Jr High		80, 85, 90, 95, 100 103, 110, 117, 124				
Name:			Division:	Wei	ght:	Actual Weight:	
Address:		City:		State:	Zip Code:		
Phone:		Team:		Birth Date	Ī		
I/We hereby in acce harmless the Trinity	pting entry inter y Area School Dis	d to be legally bound herel	oy for myself, my heirs, a Club, and anyone conne	nd assigns, and agr	ee to waive any an	d all claims and indemnify and hold ries, or damages I may have which occur	

__ Date:____

Parent Or Guardian Signature: