

MASON SPRING DUALS

Sunday, April 15th 2018

8th - 12th graders

(graduates and incoming freshmen are welcome)

at the Mason High School Wrestling Room

6100 Mason-Montgomery Rd

Mason, OH 45040

Enter behind the Community Center at Athletic entrance

Please contact me ASAP at mcintirem@masonohioschools.com to reserve a spot.

SIGNED Waiver Mandatory to Participate

8:00-8:30 am Weigh-Ins (by team)

9:00 am Start Wrestling

4:00 pm Approximate Finish

110-120-125-130-135-140-145-150-160-170-180-195-225-290

(club or school teams accepted)

14 wrestlers (plus extras if you want to sub) Extras may fill open spots on other teams.

Folkstyle - 1 ½ minute periods

Format = TBD based on # of teams.

Everyone will wrestle between 4 - 6 duals depending on format.

\$425.00 if entering as a Team -OR-

\$35 per Individual Cash or Check (Payable to Mason Wrestling Boosters)

Spectator Admission Prices:

Family = \$10.00

Adults = \$5.00

Seniors = \$3.00

Student = \$3.00

We will have a white board posted at weigh-ins where individuals needing a team will be available for pick-up. Please do everything possible to avoid forfeits.

Other Information:

1. Singlets (freestyle, 2-piece, etc.) - mandatory
2. Headgear - optional
3. Each team must supply two workers. The teams who are wrestling will run the table.
4. Concessions available.
5. Restaurants/lodging within 5 minutes.

WAIVER / RELEASE
Parent Permission
Extracurricular, Co-curricular and Athletics
Permission Section

Event/Activity: 2018 – Mason Spring Wrestling Duals Tournament; Mason High School -
Mason Ohio

Dates / Times: **Sunday April 15th, 2018;**

Permission - This permission slip is for participation in the above referenced activity.

Name of Participant _____

We, the undersigned do hereby give permission for our child to participate in the above stated activity. We do hereby assume full responsibility for any risk of bodily injury, personal injury or mental injury or death due to our child's participation in these activities and the necessary travel to and from any activity site. We also further hereby assume full responsibility for all lost, stolen, or damaged personal property and will not hold the school or its employees responsible for said loss or damage to personal property.

The undersigned further release, waive, discharge and covenant not to sue the Mason City School District Board of Education, MABA, The Mason Wrestling Boosters, Mason Wrestling Coaching Staff, its individual members, its superintendent, principals, administrators, employees, agents or anyone acting on its behalf, from all liability, arising from or by reason of any bodily injury, personal injury or mental injury, known or unknown, including death, resulting from, or to result from our child's participation in the 2016 - Mason Spring Wrestling Duals Tournament, and co-curricular activities with Mason City School District.

We expressly agree that this release is intended to be as broad and inclusive as permitted by the laws of the State of Ohio or any other state in which said student may be injured and that if any portion of this release is held invalid, it is agreed that the balance shall, nevertheless, continue in full force and effect. We further state that we have fully and carefully read the above release and know the contents of the same and sign this release as our own free act. We further consent to emergency treatment by a physician in the event of injury to or illness of our child during his/her participation in such activities.

Date Signature of Participant

Date Signature of Parent/Guardian

Phone Number In Case of Emergency _____