

2023 Murphy Open

Sunday, December 10th, 2023
Murphysboro Middle School
2125 Spruce St., Murphysboro, IL 62966

Registration: \$25.00 payable to MMS Wrestling. Advanced registration only. Pay at check-in Team checks preferred.
Limited to first 400 entries. Deadline for registration is: 1:00 PM on Saturday, Dec.9th.

Weigh-ins: All wrestlers weights must be e-mailed in by Dec.9th.
E-mail to ken.meadows@frontier.com
All wrestlers must have signed consent form at check-in.
Entries must have wrestler's name, weight, age, USA Card #, & W-L record.

Eligibility: Wrestlers must have a valid USA Wrestling Card and Coaches must display coach's card on floor.

Format: All age groups will be in 8-man blocked brackets when possible or 4-man round-robins
Age groups: 6 and under, 7-8, 9-10, 11-12, 13-14. All matches 1-1-1 min in length. 3 Rounds of wrestling.
Advanced 6,8,10,12 yr olds can move up one age group. 10 yr old can wrestle both sessions for \$50.00

Check-in: 7:00-8:30 am. For 10 and under. Start time: Approx. 9:30 am.
7:00-11:00 am. For 11-14 Start time: Approx. 1:00 pm. May start earlier if first session finishes early.
Skin, nail, and weight check in the locker room before the meet.

Awards: 1st-3rd receives trophies, 4th -6th receive medals and Champions receive a wall bracket.

Admissions: Kids \$1, Adults \$3, Family \$5.

Concessions: Outside concession trucks will be available all day long. Murphy Open t-shirts sold.

Information: Contact: Ken Meadows cell # (618) 534-4374.

Consent Form: Murphy Open Fax# 618-687-2165 or email to ken.meadows@frontier.com

Please fill out completely.

Name _____ USA card # _____ Age Group _____
Club _____ Weight _____ Record: W _____ L _____

In consideration of your acceptance of this entry, I, Intending to be legally bound hereby, or myself, my heirs, executors and administrators waive and Release the Murphysboro Middle School Wrestling, their agents, representatives, committees, and members from any and all claims or rights to damage for injuries or losses suffered by me directly in training, or in traveling to or from, or competing in, or attending the Murphy Open Tournament. Anyone falsifying information will be eliminated from competition.

Parent/Guardian Signature _____ Phone # _____

E-mail to ken.meadows@frontier.com Weigh-in Deadline 1:00 pm Saturday, Dec.9th.
Please fill in records completely for seeding brackets.

Team Name: _____

| WRESTLER'S NAME | WEIGHT | AGE | RECORD | CARD# |
|-----------------|--------|-------|---------------|-------|
| 1) _____ | _____ | _____ | _____ - _____ | _____ |
| 2) _____ | _____ | _____ | _____ - _____ | _____ |
| 3) _____ | _____ | _____ | _____ - _____ | _____ |
| 4) _____ | _____ | _____ | _____ - _____ | _____ |
| 5) _____ | _____ | _____ | _____ - _____ | _____ |
| 6) _____ | _____ | _____ | _____ - _____ | _____ |
| 7) _____ | _____ | _____ | _____ - _____ | _____ |
| 8) _____ | _____ | _____ | _____ - _____ | _____ |
| 9) _____ | _____ | _____ | _____ - _____ | _____ |
| 10) _____ | _____ | _____ | _____ - _____ | _____ |
| 11) _____ | _____ | _____ | _____ - _____ | _____ |
| 12) _____ | _____ | _____ | _____ - _____ | _____ |
| 13) _____ | _____ | _____ | _____ - _____ | _____ |
| 14) _____ | _____ | _____ | _____ - _____ | _____ |
| 15) _____ | _____ | _____ | _____ - _____ | _____ |
| 16) _____ | _____ | _____ | _____ - _____ | _____ |
| 17) _____ | _____ | _____ | _____ - _____ | _____ |
| 18) _____ | _____ | _____ | _____ - _____ | _____ |
| 19) _____ | _____ | _____ | _____ - _____ | _____ |
| 20) _____ | _____ | _____ | _____ - _____ | _____ |
| 21) _____ | _____ | _____ | _____ - _____ | _____ |
| 22) _____ | _____ | _____ | _____ - _____ | _____ |
| 23) _____ | _____ | _____ | _____ - _____ | _____ |
| 24) _____ | _____ | _____ | _____ - _____ | _____ |
| 25) _____ | _____ | _____ | _____ - _____ | _____ |

COACH'S SIGNATURE _____ AGES & WEIGHTS ARE VALID.