

Team Name _____

Contact: _____

Wrestlers Name Division Weight

Day Phone # _____

Team Contact for Tournament Day:

Place First and Last Name in Column A
NO COMMAS NO PERIODS

Place division in Column B

Place Weight wrestling in Column C
N O T what they weighed in at.

Make sure to list a phone # or e-mail address where you can be
reached ALL day during bracketing day.

Comments

- 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
- 26
- 27
- 28
- 29
- 30
- 31
- 32
- 33
- 34
- 35
- 36
- 37
- 38
- 39
- 40
- 41
- 42
- 43
- 44
- 45
- 46
- 47
- 48
- 49
- 50
- 51
- 52
- 53