



Colorado Bracketing Team

You as a club need to provide:

- Colored bout sheets made for each age group
- Three reams of White paper 11 x17 used for brackets
- You will make copies of brackets to be sold
- Provide table help
- Provide a room designated only for bracketing day/night before tournament.
- Provide a room designated only for bracketing 1 ½ hours before tournament start time.
- Provide payment to the Colorado Bracketing Team. Payment is due once all preliminary brackets are complete day prior to scheduled tournament.
- Host club must provide lunch for the Bracketing Team.

As your Bracketing Team we will provide:

- Report to a location of your choice after weights-ins to initialize the bracketing.
- We will make a set of brackets initially for wall.
- We will give you a copy of all brackets if you choose to sell Brackets.
- We will assign and number all brackets for proper tournament flow.
- We will fill out the first 10 bout sheets for each mat.
- We will deliver a packet to each table before wrestling starts with brackets and bout sheets.
- We will answer and help all wrestlers in AM with any bracketing questions up to the 1st hour once wrestling has started.

SEEDING TURNAMENTS:

- As your Bracketing Team we will provide all of the above.
- At the end of the tournament we will provide Host Club a copy of all finished Brackets.
- In the Event that the Host Tournament is providing a Novice and Experienced Tournament.
- The host club must use Track Wrestling at an additional cost to run Experience Brackets. Cost \$1.35
- Novice Brackets will be run on the original Colorado Bracketing Team System. Cost 1.00

OPTIONS

- Bracketing Team will copy and sell brackets for your tournament.
(all proceeds will go directly to the Colorado Bracketing Team)

Track Wrestling is also an option for your tournament for an additional cost.

CLUB _____

DATE AND END TIME OF WEIGHT-INS: _____

DATE OF TOURNAMENT: _____-

LOCATION OF TOURNAMENT: _____

START TIME: _____

TOURNAMENT DIRECTOR: _____

SIGNATURE OF PERSON RESPONSIBLE FOR PAYMENT: _____

NUMBER OF WRESTLERS: _____

To be filled in after initial bracketing is complete

AMOUNT DUE: _____

Please send to

M. Gomez
1612 Flint Court
Broomfield, CO 80020
mjcowrestling@msn.com