

For each meet, a copy of this form with complete full name writing in ink and signed in ink will be kept by each coach to be taken to the sectional seeding meeting prior to the sectional tournament.

Team _____		<u>Weigh in Sheet</u>					Team _____	
Cert. Weight	Wrestler's Name	AM	PM	WT	AM	PM	Wrestler's Name	Cert. Weight
				106				
				113				
				120				
				126				
				132				
				138				
				144				
				150				
				157				
				165				
				175				
				190				
				215				
				285				

We the undersigned, verify the weigh-on of the above-named wrestler's and agree that they have met all MIAA rules and regulations regarding weigh-ins. this form must be signed by all parties.

Home Coaches Signature _____

Visiting Coaches Signature _____

Principals Signature _____

Date of Meeting _____

NOTE: THE PRINCIPAL NEED NOT BE PRESENT AT WEIGH-IN'S. THEIR SIGNATURE IS REQUIRED TO VERIFY ENTRIES