

# Illinois High School Association Individual Wrestler's Season Record Verification Form

Duplicate as necessary

NOTE: This form must be completed and presented at the Individual Regional Seeding Meeting. It must include all matches in which the wrestler has competed. A copy of the Body Fat School Result Sheet must be included and given to the Regional Manager prior to the seed meeting.

Wrestler's Name \_\_\_\_\_ School \_\_\_\_\_

January 1 certified weight \_\_\_\_\_

Opponent (Wrestler and School)	Dual (D) Tournament(T)	Date	Actual Weight	Weight Wrestled	Level (V-JV-Etc.)	Score	W/L
Sample: Tom Smith, Glenview (Glenbrook South)	D	12/1/00	131	135	Varsity	8-12	L
Sample: Charlie Brown, Normal (Community)	T	12/4/00	123	125	Jr. Varsity	Pin 4:26	W
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Varsity Record: \_\_\_\_\_ Coach's Signature \_\_\_\_\_

Lower Level Record: \_\_\_\_\_ Principal's Signature \_\_\_\_\_