



WRESTLING STATE SEEDING FORM

WEIGHT _____

PRINT NAME (Correct Spelling) _____

SCHOOL _____ Year in School _____

STATE PLACE FRESHMAN YEAR _____ WEIGHT _____

STATE PLACE SOPHOMORE YEAR _____ WEIGHT _____

STATE PLACE JUNIOR YEAR _____ WEIGHT _____

CURRENT YEAR DISTRICT PLACE _____ WEIGHT _____

REGION / DISTRICT _____

DISTRICT MATCH RESULTS

OPONENT LAST NAME, FIRST INITIAL	WIN OR LOSS	RESULT

OVERALL RECORD _____

INCLUDE DISTRICT RESULTS / VARSITY ONLY

OVERALL RECORD _____

AT SEEDED WEIGHT / INCLUDE DISTRICT RESULTS / VARSITY ONLY

MATCHES

MATCH NUMBER	VARSIY OR JV	WEIGHT	SCHOOL	OPONENT LAST NAME, FIRST INITIAL	WIN OR LOSS	RESULT
1						
2						
3						
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MATCH NUMBER	VARSITY OR JV	WEIGHT	SCHOOL	OPPONENT LAST NAME, FIRST INITIAL	WIN OR LOSS	RESULT
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COACHES CONTACT INFO:

CELL NUMBER: _____ SCHOOL NUMBER: _____ HOME NUMBER: _____