



NCHSAA VARSITY WRESTLING TEAM SPLIT-SQUAD TOURNAMENT REQUEST FORM

ROBBINSVILLE HIGH SCHOOL

SCHOOL DETAILS

Head Coach Name: Todd Odom..... Classification: 1A 2A 3A 4A.....

Conference: Smoky Mountain Conference Email: Todd.odom@ncfbins.com.....

SPLIT-SQUAD TOURNAMENT REQUEST NUMBER FOR THE YEAR

☒ 1st Request ☐ 2nd Request ☐ 3rd Request

[Teams may use this provision a maximum of three (3) times per season]

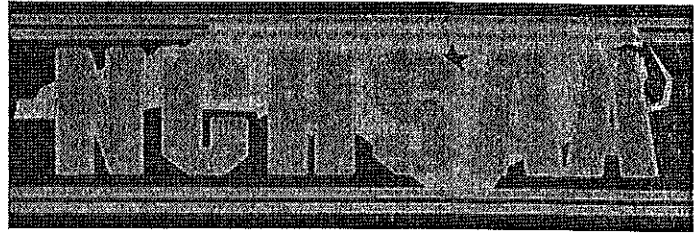
TOURNAMENT DETAILS

Event Name	Host School	Format (D/I)*	Date(s)
[Event 1] Enka Duals	Enka High School	D	01/04/2019
[Event 2] Osley B Saunooke	Cherokee High School	I	01/04/2019

*D - Dual Team Format

*I - Individual Format

REQUESTS SHOULD BE EMAILED TO TRA@NCHSAA.ORG PRIOR TO EVENT



NCHSAA VARSITY WRESTLING TEAM
SPLIT-SQUAD TOURNAMENT REQUEST FORM

[SCHOOL NAME]

SCHOOL DETAILS Swain County H.S.

Head Coach Name: Adam Jaimez Classification: 1A 2A 3A 4A

Conference: Smoky Mtn. 1A Email: ajaimiez@swainmail.org

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TOURNAMENT DETAILS

Event Name	Host School	Format (D/I)*	Date(s)
[Event 1] Enka Duals	Enka	D	1/4/20
[Event 2] Osley B. Saurnoke	Cherokee	I	1/4/20

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*I - Individual Format

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