



**IHSAA WRESTLING  
MINIMUM WEIGHT  
CERTIFICATION CARD**  
TO BE COMPLETED BY COACH

School - \_\_\_\_\_

Date - \_\_\_\_\_

Name - \_\_\_\_\_

DOB - \_\_\_\_\_ Age - \_\_\_\_\_

Gender - M F Grade Level - \_\_\_\_\_

\*\*Height - \_\_\_\_\_

\*\*Hydration - Pass Fail

**\*\*ASSESSOR WILL FILL IN THIS INFORMATION**



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