



**State Final
Wrestling
Facility Survey**

GENERAL INSTRUCTIONS & INFORMATION

The IESA is accepting proposals to host the State Final Wrestling Tournament for the 2018-19, 2019-2020, 2020-21, 2021-2022, and 2022-23 school years.

Dates

Event Date(s) – IESA conducts its state final wrestling tournament in the month of March on Friday-Saturday of Week No. 36 of the NFHS Standardized Calendar. The state final is a two-day event. Member school(s) submitting a proposal to host must guarantee the facility to be used for the state final tournament shall be available as required, and shall be the same facility each year. Dates for the state finals of 2019-2023 are:

2019 – March 8-9
2020 – March 13-14
2021 – March 12-13
2022 – March 11-12
2023 – March 10-11

Times

Thursday

Set-up 4:00 p.m. to 8:00 p.m.---approx.

Friday

Facilities Available – 8:00 a.m. to Close---9:00 p.m. approx.

Competition – 4:00 p.m. to 8:00 p.m. (Approximately if same schedule that is currently in place is used). Discussions are being held to change the starting time to earlier than previous years to allow three rounds to be held on Friday. If so, weigh-ins would be held from 10:00 a.m.-11:15 with wrestling starting at 1:00 and finishing around 7:30 p.m.

Saturday

Facilities Available – 7:00 a.m. to Close---8:30 p.m. approx.

Competition – 9:00 a.m. to 7:00 p.m. (Approx.)

This Facility Form must be signed by the host submitting this form and the accompanying letter of intent whose signature will be legally binding on the facility or individual submitting the proposal.

This Facility Form must be accompanied at time of submission by all required documentation as specified by IESA.

Questions about this proposal should be directed to Steve Endsley, Executive Director, IESA. The IESA reserves the right to reject any or all proposals.

This Form must be submitted and returned to the IESA Office by March 15, 2018.

1) ENTITY SUBMITTING FORM:

Name: _____
Address: _____
City: _____
Zip: _____
Telephone Number & Extension: _____
E-mail Address: _____
Name of Contact Person (if other): _____

2) SITE OF STATE FINAL MEET:

Name of Facility: _____
Address: _____
City: _____ Zip: _____

3) STATE FINAL MEET CONTACT:

Name: _____
Title: _____
Telephone Number & Extension: _____
Fax : _____
Email Address: _____

4) STATE FINAL EXPENSES: \$ _____

Detail all anticipated expenses for the event which includes facility rental, staffing expenses, mat expenses, table help expenses. Do not include officials costs or awards as those are paid by IESA. Be sure to list all anticipated expenses including those of the host facility and any costs incurred by the host school.

5) COMPETITION FACILITIES

What is the size of the floor of the facility? _____

Will the floor be space enough for eight mats? Yes No

If no, how many mats can it accommodate? _____

What surface will the mats be on? _____

What kind of lighting does the facility have above the competition area?

What is the seating capacity in the competition area? _____

How many dressing rooms for wrestlers will be available? _____

Where will the floor officials dress? _____

Is the area where the floor officials dress secure? Yes No

Is the officials dressing room large enough to accommodate 10? Yes No

How many wrestlers can the dressing rooms accommodate? _____

Where will the wrestlers weigh in? _____

Where will the wrestlers warm up? _____

Where will the nineteen (19) bracket boards be displayed?

6) OTHER SITE FACILITIES

How many concession stands are there on site? _____

Describe the areas on site where the IESA official apparel vendor and the Official Photographer will be located:

Is there electrical power available for these areas? Yes No

Who will sell the official programs provided by IESA and where will they be sold?

How many restrooms are there for spectators? Women _____ Men _____

How much parking is available? _____ spaces

Is there are a charge of cars to park? Yes No

 If yes, how much is this charge? _____

Where is location of parking? _____

Where will school buses/vans park?

Is there are charge for school buses to park? Yes No

 If yes, how much is the charge? _____

7) **SECURITY ARRANGEMENTS:**

Please describe the security arrangements that will be in effect at your facility. If a third party will be the provider of security, please state the name of that third party, their complete address, and ***include*** a copy of their insurance coverage and bonding limits. Also indicate the availability of First Responder units for hazardous materials, and ***include*** a copy of Facility Emergency Procedures for Bomb Threats, etc.

8) **MEDICAL EMERGENCY RESPONSE & TREATMENT CAPABILITIES:**

Please describe the medical treatment capabilities that will be in effect at your facility. If a third party will be the provider of medical assistance, please state the name of that third party, their complete address, and ***include*** a copy of their insurance coverage and bonding limits.

9) ADVERTISING PROHIBITIONS:

Advertising within your facility for alcohol, tobacco products and for gambling interests will have to be covered within reason during the meet within your facility. Beer taps would need to be removed and all precautions to limit exposure of alcohol signage must be taken.

Do you accept this condition? Yes No

10) LIABILITY INSURANCE COVERAGE:

Amounts of each occurrence liability insurance coverage: _____

Amounts of aggregate liability insurance coverage: _____

INCLUDE A COPY OF YOUR CERTIFICATE OF INSURANCE

11) PROPERTY DAMAGE INSURANCE:

Amounts of each occurrence property insurance coverage: _____

Amounts of aggregate property insurance coverage: _____

INCLUDE A COPY OF YOUR CERTIFICATE OF INSURANCE

12) LOST AND FOUND:

Is there a lost and found? Yes No

If yes, where is it? _____

13) STORAGE FACILITIES:

Is there secure storage space for IESA equipment? Yes No

If yes, where is it? _____

14) TICKET SALES

Describe the facilities available for the sale of tickets and how they will be staffed.

Are the ticket sellers and takers employees of the site? Yes No

15) SIGNAGE:

If there space to display IESA-authorized signs? Yes No

If yes, where? _____

You may attach additional pages to this proposal if needed.

If additional pages are attached, please label them Appendix A, B, C, etc.

If the additional information is in response to a numbered question on the previous pages, please reference your additional information to that numbered question.

SUBMITTED BY:

Date: _____

Signature

Printed Name

Title