

ARIZONA SUNKIDS CLASSIC NATIONAL TOURNAMENT

Sponsored BY: FCA
Fellow Christian Athletes

CUSTOM AWARDS GO TO :) Top 4 Wrestlers / Top 3 Teams / 3 Outstanding/ Champion also receives Watch & Wall bracket (32 MAN BRACKETS/DOUBLE ELIMINATION)

- **PLACE:** Marcos De Niza H.S., 6000 S. Lake Shore, Mesa, AZ
- **CONTACTS:** Alex or Ronda Pavlenko (480) 835-9497
- **TOURN. DATE:** Saturday, January 06, 2007
- **TIME:** Coaches Meeting 7:30 a.m. **WRESTLING BEGINS AT 8:00 a.m.**
- **WEIGH-INS:** Friday, January 05, 2006 5:00-6:30 p.m.
- **ENTRY FEE:** \$250 Per Team... Team Rosters and Payment Deadline is December 30, 2006, No subs or changes will be made after January 03, 2007
- **MAKE PAYMENT TO: *Sunkids Wrestling***
- **SEND TO:** *ALEX PAVLENKO, P.O. Box 4734, MESA, AZ 85211-4734*
- **WEIGHTS:** 63, 68, 73, 78, 83, 88, 93, 98, 104, 111, 118, 125, 133, 142, 154, 167, 180, HWT.(MAX 240 LBS.) *8TH GRADE and below ONLY!!! Must not be 15 before 9/1/05*
MUST MAKE WIEGHT - NO BUMP UPS OR CHANGES
- **ADMISSION:** Adults \$5 Children \$3 PER PERSON ONE TIME FEE FOR ALL DAY . TEAMS 3 COACHES PASSES. ADDITIONAL FLOOR PASSES WILL BE AVAILABLE FOR \$20 EA. (MAY BE PURCHASED AT WEIGH-INS. BRACKETS WILL BE FOR SALE \$1 PER WEIGHT)

WE WILL BE ACCEPTING THE FIRST 25 TEAMS, THEN ALLOWING WRESTLERS INDIVIDUALLY TO ENTER TO COMPLETE THE 32 MAN BRACKETS. ALL WRESTLERS BRACKETED MUST WEIGH IN. NO EXCEPTIONS. NO REFUNDS OR CREDITS AFTER DEADLINE. THANK YOU FOR YOUR COOPERATION.

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INDIVIDUAL WAIVER

NO CHILD WILL WRESTLE WITHOUT WAIVER

In consideration of your acceptance of this form, I hereby for myself, my administrators, my heirs and assigns waive and release any and all rights and claims for damages that I have against the organizers, their associates, representatives and affiliates of this event for any and all injuries of any nature suffered by my child while taking part in this event and any related activities.

(parent or guardian signature)

(Date)

(Name of Student)

(Name of school)

Please make enough copies for each wrestler **“DO NOT FAX”**
hand deliver or mail

Az Sunkids Classic, c/o Alex Pavlenko, P.O. Box 4734, Mesa, AZ 85211-4734

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INSURANCE WAIVER

We _____ school or club and our team members will not hold Sunkids wrestling club or Az Sunkids Classic or Skyline High School personally liable in case of injury that might be incurred during the said tournament. Furthermore, it is understood that each school or club and/or student must have his or her own medical insurance in order to participate in the Arizona Sunkids Classic National Tournament.

Dated the _____ day of _____ 200_

Signed _____
(School- Principal or A.D. Club-Coach)

Accepted by _____ date filed _____

Please return by December 30, 2006

c/o Alex Pavlenko
P.O. Box 4734
Mesa, AZ 85211-4734
Mail or Hand deliver at weigh ins

ARIZONA SUNKIDS CLASSIC NATIONAL TOURNAMENT

ROSTER

School/Club _____

Coaches *please type or write very legibly*

NAME	RECORD	TOURN. PLACE
63	_____	_____
68	_____	_____
73	_____	_____
78	_____	_____
83	_____	_____
88	_____	_____
93	_____	_____
98	_____	_____
104	_____	_____
111	_____	_____
118	_____	_____
125	_____	_____
133	_____	_____
142	_____	_____
154	_____	_____
167	_____	_____
180	_____	_____
HWT.	_____	_____

(240 LB. MAX)

Coach Name _____ Phone # _____

DEADLINE December 30, 2006

Fax @ 480-835-9497 or mail to SUNKIDS CLASSIC
C/O Alex Pavlenko, P.O. Box 4734, Mesa, AZ 85211-4734
Must not be 15 before 9/1/06