

# ARIZONA SUNKIDS CLASSIC NATIONAL TOURNAMENT

## **ROSTER**

School/Club \_\_\_\_\_

Coaches *please type or write very legibly*

<b>NAME</b>	<b>RECORD</b>	<b>TOURN. PLACE</b>
68		
73		
78		
83		
88		
93		
98		
104		
111		
118		
125		
133		
142		
154		
167		
180		
200		
HWT.		

(260 LB. MAX)

Coach Name \_\_\_\_\_ Phone # \_\_\_\_\_

***DEADLINE December 28, 2007***

Fax @ 480-835-9497 or mail to SUNKIDS CLASSIC  
C/O Alex Pavlenko, P.O. Box 4734, Mesa, AZ 85211-4734

*Can not be 15 before 9/1/07*

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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 Mesquite 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 28, 2007***

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

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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

# ARIZONA SUNKIDS CLASSIC NATIONAL TOURNAMENT

Unattached & individual wrestlers welcome

*CUSTOM AWARDS GO TO :) Top 4 Wrestlers /  
Top 3 Teams / 3 Outstanding/*

*Champion also receives Watch & Wall bracket  
(DOUBLE ELIMINATION)*

- **PLACE:** Mesquite H.S., 500 South McQueen Gilbert, AZ 85233
- **CONTACTS:** Alex or Ronda Pavlenko (480) 835-9497
- **TOURN. DATE:** Saturday, January 05, 2008
- **TIME:** Coaches Meeting 8:30 a.m. **WRESTLING BEGINS AT 9:00 a.m.**
- **WEIGH-INS:** Friday, January 04, 2008 5:30-6:30 p.m.
- **ENTRY FEE:** \$250 Per Team...Team Rosters and Payment Deadline is December 28, 2007, No subs or changes will be made after January 02, 2008
- **MAKE PAYMENT TO: *Sunkids Wrestling***
- **SEND TO:** *ALEX PAVLENKO, P.O. Box 4734, MESA, AZ 85211-4734*
- **WEIGHTS:** 68, 73, 78, 83, 88, 93, 98, 104, 111, 118, 125, 133, 142, 154, 167, 180, 200 HWT.(MAX 260 LBS.) *8TH GRADE and below ONLY!!! Can not be 15 before 9/1/07*  
**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)

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***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.***