

# **#2010 “Sunkids Classic”**

Middle School National Tournament

**ALL WRESTLERS ARE WELCOME:  
UNATTACHED---INDIVIDUAL---SCHOOLS---CLUBS.....  
WE WANT THE BEST WRESTLERS!!!!**

**Come see why THIS EVENT has been called the...  
“BEST & TOUGHEST MIDDLE SCHOOL  
TOURNAMENT IN THE WEST!”**

- **PLACE:** Tempe High School, 1730 S. Mill Ave., Tempe, Az 85281
- **CONTACTS:** Alex or Ronda Pavlenko Message (480) 835-9497 or 480-518-1792 Cell
- **TOURN. DATE:** Saturday, January 02, 2010
- **TIME:** Coaches Meeting 8:30 a.m. **WRESTLING BEGINS AT 9:00 a.m.**
- **WEIGH-INS:** Friday, January 01, 2010: 4:30-5:30 p.m. @ Tempe High School
- **MAIL TO:** P.O. Box 4734, Mesa Az 85201
- **ENTRY FEE:** \$250 Per Team...\$20 for individuals. Team Rosters and Payment Deadline is December 23, 2009, Late fee is \$300 Per team...\$25 for individual. - **NO REFUNDS**
  - No subs or changes will be made after December 30, 2009. **MUST MAKE WEIGHT - CHANGES ARE ADDITIONAL \$25 PENALTY PER ITEM/WRESTLER. NO GUARANTEES OF CHANGE-DESCRECTION OF HEAD PAIRER**
- **WEIGHTS:**63, 68, 73, 78, 83, 88, 93, 98, 104, 111, 118, 125, 133, 142, 154, 167, 180, HWT. (MAX 265 LBS.) **8TH GRADE and below ONLY!!! Can not be 15 before 9/1/09**
- Please visit our website at [www.azsunkids.com](http://www.azsunkids.com) for all the details and to download wavier forms.

***“We are committed to excellence”***

- **CHALLENGES:** \$50 to file Challenge. (non refundable) Challenged: must show proof of age. (Birth Certificate, USA Card, AAU Card)

**Event Name: Sunkids Classic**

***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. Furthermore, it is understood that each school or club and/or student/athlete must have their own medical insurance in order to participate in the Sunkids Classic.

\_\_\_\_\_  
(parent or guardian signature)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Name of Student)

Age group \*\*\*\*\* Weight

***INSURANCE WAIVER***

We \_\_\_\_\_ school or club and our team members will not hold Sunkids wrestling club or Tempe Union High School District 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/athlete must have their own medical insurance in order to participate in the Sunkids Classic.

Dated the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ \_\_

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

Accepted by \_\_\_\_\_ date filed \_\_\_\_\_

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

# Event Name: Sunkids Classic

## TEAM 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. \_\_\_\_\_ (265 LB. MAX)

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

Fax @ 480-307-8052 or e-mail [azsunkids@cox.net](mailto:azsunkids@cox.net) or mail to Sunkids Classic  
C/O Alex Pavlenko, P.O. Box 4734, Mesa, AZ 85211-4734

*Can not be 15 before 9/1/09*