

SENIOR

(Teams will be selected from top 4 scores.)
Regis fee for each on these pages = **\$75.00**.

SPONSOR/ORGANIZATION/COUNTY: _____

Team Name: _____

County: _____ Coach/Leader: _____

Coach/Leader: _____

FOR EVERY 5 PARTICIPANTS (JUNIOR AND SENIOR COMBINED), A COACH/ESCORT MUST BE DESIGNATED = MUST STAY OVERNIGHT - FULL FEE REQUIRED

Address: _____
Street City STATE ZIP

Cell Phone Number:(_____) _____

Individual Members

1. _____
First Name Last Name Birthdate H.E. Card #

Street City State Zip Age
FIRST TIMER RETURNING MALE FEMALE SHIRT SIZE _____

2. _____
First Name Last Name Birthdate H.E. Card #

Street City State Zip Age
FIRST TIMER RETURNING MALE FEMALE SHIRT SIZE _____

3. _____
First Name Last Name Birthdate H.E. Card #

Street City State Zip Age
FIRST TIMER RETURNING MALE FEMALE SHIRT SIZE _____

4. _____
First Name Last Name Birthdate H.E. Card #

Street City State Zip Age
FIRST TIMER RETURNING MALE FEMALE SHIRT SIZE _____

SENIOR

5.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

6.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

7.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

8.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

9.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

10.

_____	_____	_____	_____
First Name	Last Name	Birthdate	H.E. Card #
_____		_____	_____
Street	City	State	Zip Age
FIRST TIMER <input type="checkbox"/>	RETURNING <input type="checkbox"/>	MALE <input type="checkbox"/>	FEMALE <input type="checkbox"/>
		SHIRT SIZE_____	

EXTRA PAGES MAY BY COPIED AS NEEDED