

# 2012 WSSA Southeast Regional Sport Stacking Championships

## SPECIAL STACKERS Individual Registration form

One form per participant please!

<b>Stacker's Name</b> _____	<b>Home PH#</b> (____) _____	<b>Please Print</b>
<b>List disability</b> _____		
<b>Date of Birth (Month/Day/ Year)</b> _____		<b>Age on 2/11/12</b> _____
<b>Age Division</b> (circle one) SS 6 & under SS 7-10 SS 11-14 SS 15-18 SS Open (19 & above)		<i>Note: Special Stackers compete in one of ten categories determined first by their age and second by their current stacking ability based on their "Best Time" Time below.</i>
<b>Level</b> (circle one) 1 2 (Based on the Leveling Time below)		
<b>Home Address</b> _____		
<b>City</b> _____	<b>ST/PV/Country</b> _____	<b>Zip/Postal Code</b> _____
<b>School/Organization</b> _____	<b>Sport Stacking Instructor</b> _____	<b>ST/PV/Country</b> _____
<b>Parent/Guardian</b> _____		<b>WK PH#</b> (____) _____
<b>Hm/Cell PH#</b> (____) _____	<b>Email Address</b> _____	

### EARLY REGISTRATION FEE (Due to your Instructor by January 27th)

- \$20 Special Stackers division registration fee
- \$10 Additional late registration fee (if received after January 30th)

\$\_\_\_ **TOTAL amount included**

(Please make checks payable to Columbus Sports Council)

**PARENT AGREEMENT:** "I understand that my child will need to be supervised during the competition. Either myself or another adult (which I choose) will assume this responsibility. By signing this registration: 1) I am granting the World Sport Stacking Association, Speed Stacks, Inc., and their affiliates permission to film and record my child's likeness, appearance, image, name and/or voice in any media. Such film and/or recordings may be sold or used for promotional, broadcast, or other purposes, worldwide, in perpetuity, 2) I verify that the stacker's date of birth is accurate, 3) I verify that the stacker resides in the State/Province/Country stated above. The consideration I am to receive for my granting such rights is the right for my child to participate in the 2012 Southeast Regional Sport Stacking Championships."

**SIGNED** \_\_\_\_\_

**DATE** \_\_\_\_\_

Please give this Individual Registration form and fee to your Sport Stacking Instructor by **January 27th**.

Mail to: Columbus, GA Sports Council P.O. Box 1519 Columbus, GA 31902

**2012 Southeast Regional Sport Stacking Championships Questions?** Call—Merri Sherman at 706-660-1996 or email [msherman@columbusga.org](mailto:msherman@columbusga.org). Information may also be acquired by visiting the [www.worldsportstackingassociation.org](http://www.worldsportstackingassociation.org) website.

### LEVELING TIMES

Special Stackers will qualify to compete in one of two "Levels" in their age division. We have patterned qualifying for each Level after the Individual competition itself. We ask that an adult oversee (or time) the Stacker for three tries, record each time in the spaces below and then fill in the Best Time. If using a StackMat, the Stacker will start and stop the timer and correct all fumbles. If using a stopwatch the Stacker should: start with hands flat on the table; have no false starts; correct all fumbles; and be timed to the 1/100 of a second. Timer says 'Ready...Get Set...Go!' and starts the stopwatch on the word "Go".

**Time** \_\_\_\_\_

Level 1 = 7.99 seconds or under

Level 2 = 8.00 seconds or over

**I have qualified for Level:** 1 2 (circle one)

Adult Signature \_\_\_\_\_

Date \_\_\_\_\_

For Office Use

Date entered: \_\_\_\_\_ Entered by: \_\_\_\_\_

Check # \_\_\_\_\_  Cash

Team: Y N

