



2012 SW Region Sport Stacking Championships



Special Stackers Registration Form (One form per participant please!)

(Give this to your Relay Team Coach to turn in along with each team member's Individual & "Doubles" Registration Forms and fees.)

Stacker's Name _____	Home PH# (____) _____	Please Print
Date of Birth (Month/Day/Year) ____/____/____ Age on 2/18/12 _____		
Age Division (circle one) 4 & under, 5, 6, 7, 8, 9, 10, 11, 12, 13-14, 15-18, Collegiate (19-24), Masters 1(25-34), Masters 2(35-44), Masters 3(45-59) Seniors (60 & above)		
School/Organization _____	Sport Stacking Instructor _____	State/ _____
Parent/Guardian _____		E-Mail _____
Cell PH# (____) _____	Home Address _____	
<input type="checkbox"/> I'm on a team <input type="checkbox"/> I'd like to join a Relay Team and will see my Instructor for help		
Relay Team Name _____		
Relay Team Division (circle one) 6u, 7u, 8u, 9u, 10u, 11u, 12u, 14u, 18u, Open (19 & above)		
<i>Note: u = under</i>		
Relay Team Coach _____		Relay Team Coach PH# (____) _____

Please check your Individual event(s)

3-3-3	3-6-3	Cycle
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EARLY REGISTRATION FEE (Due to Lori Hawkins by Jan 25th)

- \$15 Applies to all competitors
- \$10 Additional late registration fee (if received after Jan 25th, 2012)

\$___ TOTAL amount included
(Please make checks payable to Rocklin Sport Stacking)

Mail to: **Lori Hawkins, Tournament Director**
 Rock Creek Elementary School
 2140 Collect Quarry Dr
 Rocklin, Ca. 95675

PARENT AGREEMENT: "I understand that my child will need to be supervised during the competition. Either my child's Relay Team Coach or I will assume this responsibility. By signing this registration, I am granting the World Sport Stacking Association, Speed Stacks, Inc., and their affiliate's 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. The consideration I am to receive for my granting such rights is the right for my child to participate in the 2012 CA. Sport Stacking Championships."

SIGNED _____ **DATE** _____

Please give this Individual Registration form and fee, along with any "Doubles" and Volunteer Registration forms to your Relay Team Coach, who will collect all your team members' Individual "Doubles" forms, fill out the Relay Team Registration form and mail them to Lori Hawkins postmarked by **Jan 25th 2012**.
2012 SW Region / CA. State Sport Stacking Championships Questions? Call—Lori Hawkins at (916) 725-7654 or email her at loralihawkins@yahoo.com Information may also be acquired by visiting the www.worldsportstackingassociation.org website.



Date entered: _____ Entered by: _____
<input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash Team: Y N