

2012 4th Annual Piedmont-Triad Sport Stacking Invitational WSSA Sanctioned Tournament

When? March 10, 2012

**Where? William Ellis Middle School
144 William Ellis Drive
Advance, NC 27006**

Cost: \$16.00 (Tournament T-shirt)

**Early Registration Postmarked:
February 24 2012**

***Late Registration Postmarked:**

March 2, 2012

Late Fee: \$21.00

*****No registration accepted on
Day of Tournament!***

Send Registration & payment to:

Shady Grove Elementary
3179 Cornatzer Rd.
Advance, NC 27006

Attn: Karen Umberger

Cash, checks, counter checks and money orders accepted. Make checks to: "Shady Grove Elementary"

**** Tournament numbers limited to 250 participants!! First come, first served!*

Contact Person: Karen Umberger

umbergerk@davie.k12.nc.us

1-336-998-4719

Concessions available.

Admission: \$1 for non-stackers Individuals and groups welcome!

Medals for top 3 places. Ribbons for 4th & 5th in each age group event.

Stacker checklist of things to do:

- 1) Review all registration form with parents and coaches. Be sure parent signs registration form.**
- 2) Talk with your friends and form a relay team (4-5 members).**
- 3) Form a "Doubles" team to compete in "Doubles" competition.**
- 4) Find a coach/parent to host pre-competition practices.**
- 5) Have coach/parent complete one Team Registration form.**
- 6) Complete your individual and doubles form and send in for early registration.**
- 7) Mail your completed registration forms by February 24 with tournament fees.**
- 8) Practice! Practice! Practice!**

Schedule of Events

8:15-8:45	Check-In
9:00	Opening Ceremonies
9:15 -10:45	Individuals (Prelims) Doubles (Prelims)
10:45 – 12:00	Timed 3-6-3 Relay (Prelims)
12:30	Posted Finals
1:00 – 2:30	Individual & Doubles Finals
2:30 – 3:30	Timed Relay Finals
3:30	Awards Ceremony

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A WSSA Sanctioned Tournament

Saturday, March 10, 2012

Individual Registration Form

Name _____ Birth Date ____/____/____ Grade ____ Age ____

Address _____ City/State/Zip _____

Email _____ Phone _____ Cell _____

School _____ Coach/Parent _____

Age Division: (circle one)

5 & Under 6 7 8 9 10 11 12 13-14 15-Open

Shirt Size: YS YM YL AS AM AL AXL AXXL

Competition Events (Circle all that apply)

Individual Events: 3-3-3 3-6-3 Cycle

Team Events: Doubles-Cycle Timed 3-6-3 Relay

I am on a Relay Team (Team Name _____ & Age Division _____)

I am not on a team. I would like to be put on a team on day of tournament.

I do not wish to participate on a Timed Relay Team

Entry Fee: \$16 per Stacker (Good for participation in all events)

Early Registration must be postmarked by: February 24, 2012

***Late Registration must be postmarked by: MARCH 2, 2012**

***Late Fee: \$21.00**

****No Registration accepted on Tournament Day!**

Send Registration & payment to:

Shady Grove Elementary
3179 Cornatzer Rd.
Advance, NC 27006
Attn: Karen Umberger

Cash, checks, counter checks and money orders accepted. Make checks to: **“Shady Grove Elementary”**

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 responsibility. By signing this registration: 1) I am granting the WSSA 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 Piedmont-Triad WSSA Invitational.”

SIGNED _____ DATE _____

2012 4th Annual Piedmont-Triad Sport Stacking Invitational

Doubles and Team Relay Registration Form

****Each participant listed on the Doubles and Timed Relay Teams must be registered as an individual stacker for the Piedmont-Triad Sport Stacking Invitational.***

Doubles Division – Cycle (circle one)

7u 10u 12u 14u 15 - Open

Stacker “1” NAME _____

Date of Birth ____/____/____ Age on 3/10/12 ____ Phone _____

Stacker “2” NAME _____

Date of Birth ____/____/____ Age on 3/10/12 ____ Phone _____

TIMED RELAY EVENT: 3-6-3

AGE DIVISION: (CIRCLE ONE) 6u 7u 8u 9u 10u 11u 12u 14u 15-Open

Relay Team Name (optional) _____

Coach/Parent _____ Phone _____

Email _____ School _____

Team Members (list all team members)

	First & Last Name	Age (on 3/10/12)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

(#5 Optional)

PLEASE, submit one Team Relay entry form.

Relay and doubles teams are not eligible unless all individual members have registered. All relay teams must have at least four members. Fifth member is optional. All registration fees are non-refundable.

Relay and doubles teams must compete at the age division of the oldest stacker on the team. Stackers may compete on only one team dictated by the oldest stacker (both relays and doubles). Each doubles team will be allowed two warm-ups and three tries. Stacker on right must use right hand only and stacker on left must use left hand only

Medals will be awarded to the top three teams in each age group and ribbons for fourth and fifth places.

Relay team cards may be obtained from the Check-in table and filled out on the day of the tournament.

2012
4th Piedmont-Triad Sport Stacking Invitational
Special Stacker's Registration Form

Name _____	Birth date ____/____/____	Grade ____	Age ____
Address _____		City/State/Zip _____	
Email _____	Phone _____	Cell _____	
School _____	Coach/Parent _____		
List disability: _____			
Age Division: (circle one) SS 10 & Under SS 11 & Open			

Events: (Circle the ones participating in)

3-3-3 3-6-3 Cycle Doubles (3-6-3) Timed 3-6-3 Relay

Doubles Division – 3-6-3 (circle one)		SS 10 & Under	SS 11 & Open
SS Stacker "1" NAME _____			
Age on 3/10/12 _____		Phone _____	
SS Stacker "2" NAME _____			
Age on 3/10/12 _____		Phone _____	

TIMED RELAY EVENT: 3-6-3		SS 10 & Under	SS 11 & Open
Relay Team Name (optional) _____			
Coach/Parent _____		Phone _____	
Email _____		School _____	
Team Members (list all team members)			
First & Last Name		Age (on 3/10/12)	
1.	_____	_____	
2.	_____	_____	
3.	_____	_____	
4.	_____	_____	
5.	_____	_____	
(#5 Optional)			

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 responsibility. By signing this registration: 1) I am granting the WSSA 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 2009 Piedmont-Triad WSSA Invitational."

SIGNED _____ DATE _____