

2009 WSSA Georgia State Sport Stacking Championship

INDIVIDUAL Registration Form (One form per participant please!)

Give this to your 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 2/7/09 _____	
Age Division <i>(circle one)</i> 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)	
Home Address _____	
City _____ ST/PV/Country _____ Zip/Postal Code _____	
School/Organization _____ Sport Stacking Instructor _____ ST/PV/Country _____	
Parent/Guardian _____ WK PH#(____) _____	
Hm/Cell PH#(____) _____ Email 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>	
Coach _____ Coach PH#(____) _____ Email _____	

EARLY REGISTRATION FEE (Due to your Instructor by January 9th)

- \$20 Registration Fee Applies to all competitors
- \$10 Additional late registration fee (if received after January 16th)

\$____ TOTAL amount included
(Please make checks payable to Euharlee Elementary School)

PARENT AGREEMENT: "I understand that my child will need to be supervised during the competition. Either my child's Coach or myself 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 2006 World Sport Stacking Championships."

SIGNED _____ DATE _____

QUALIFYING TIMES

To participate in the 2009 Georgia State Sport Stacking Championships, stackers ages 6-18 must meet or beat the Qualifying times designated below. We have patterned qualifying for the tournament 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".

3-6-3 Qualifying Times		
Ages 6 -7	9.00 Seconds or faster	No qualifying times
Ages 8 -9	8.00 Seconds or faster	for all other
Ages 10-18	7.00 Seconds or faster	divisions.

First Try _____, Second Try _____,
Third Try _____, **Best Time** _____

Adult Signature _____
Date _____

Please give this Individual Registration form and fee, along with any "Doubles" and Volunteer Registration forms to your Coach, who will collect all your team members' Individual "Doubles" and Volunteer forms, fill out the Relay Team Registration form and turn them all in to your Sport Stacking Instructor by Friday, January 9th.

Mail to: Euharlee Elementary School c/o Sean Hynes 1058 Euharlee Rd., Euharlee Georgia, 30145.
2008 WSSA Georgia State Sport Stacking Championships Questions? Call—Sean Hynes at 770-606-5900 or email him at shynes@Bartow.k12.ga.us.
Information may also be acquired by visiting the www.worldsportstackingassociation.org website.

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

