



# INDIVIDUAL Registration Form

(One form per participant please!)

Presented by

Wonderful  
PISTACHIOS

<b>Stacker's Name</b> _____	<b>Phone ( )</b> _____	<b>Please Print</b>
<b>Date of Birth (Month/Day/Year)</b> ____/____/____ <b>Age on 2/27/10</b> _____		
<b>Age Division</b> (circle one) 4u, 5, 6, 7, 8, 9, 10, 11, 12, 13-14, 15-18, Collegiate (19-24), Masters (25-34), (35-44), (45-59), Seniors (60 & above)		
<b>Home Address</b> _____		
<b>City</b> _____	<b>State</b> _____	<b>Zip Code</b> _____
<b>School/Organization</b> _____		<b>Sport Stacking Instructor</b> _____
<b>Parent/Guardian</b> _____		<b>Phone ( )</b> _____
<b>Cell Phone ( )</b> _____		<b>Email Address (required)</b> _____

I'm on a Relay Team    I'm not on a team. Put me on one and call me.    I do not want to be on a Relay Team

**Relay Team Name** \_\_\_\_\_

**Relay Team Division (circle one)** 6u, 7u, 8u, 9u, 10u, 11u, 12u, 14u, 18u, Open (19 & above)     *Note: u = under*

**Coach** \_\_\_\_\_     **Phone( )** \_\_\_\_\_     **Email** \_\_\_\_\_

### EARLY REGISTRATION FEE (Due to your Instructor by February 16, 2010)

\$15 Registration Fee—Applies to all competitors

\$20 Late Registration Fee—If received after February 16, 2010

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

Please make checks payable to Peoria Area Convention and Visitors Bureau (PACVB)

**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 2010 WSSA Illinois State Sport Stacking Championships."



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

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

Please give this Individual Registration form and fee, along with any Doubles Registration forms to your coach, who will collect all your team members' Individual and Doubles forms to your Sport Stacking Instructor by **February 16, 2010**.

Mail to: PACVB, Attn: Chevie Ruder, 456 Fulton Street, Suite 300, Peoria, IL 61602

**2010 WSSA Illinois State Sport Stacking Championships Questions?** Call—Chevie Ruder at (309) 282-3285 or email her at [cruder@peoria.org](mailto:cruder@peoria.org). Information may also be acquired by visiting the [www.worldsportstackingassociation.org](http://www.worldsportstackingassociation.org) website.

## Event Information

Date: February 27, 2010     8:30am—5:00pm

Location: Peoria Civic Center, 201 SW Jefferson Avenue, Peoria, IL 61602

<b>Office Use Only</b>	Date entered: _____ Entered by: _____ Paid by: <input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash \$ _____ Team: Y / N
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