



# 2009 Oregon State Sport Stacking Championships

## INDIVIDUAL Registration Form (One form per participant please!)

**Note: Special Stackers, please use the Special Stackers Form.**  
*(Give this to your Coach to turn in along with each team member's Individual & "Doubles" Registration Forms and fees.)*

<b>Stacker's Name</b> _____	<b>Home PH#</b> (____) _____	<b>Please Print</b>
<b>Date of Birth (Month/Day/Year)</b> ____/____/____ <b>Age on 11/21/09</b> _____		
<b>Age Division</b> (circle one)    4 & under    5    6    7    8    9    10    11    12    13-14    15-18		
Collegiate (19-24)    Masters (25-34)    Masters (35-44)    Masters (45-59)    Seniors (60 & up)		
<b>Check your Individual event(s)</b> (as many as apply) <input type="checkbox"/> 3-3-3 <input type="checkbox"/> 3-6-3 <input type="checkbox"/> Cycle		
<b>Home Address</b> _____		
<b>City</b> _____	<b>ST</b> _____	<b>Zip/Postal Code</b> _____
<b>School/Organization</b> _____		<b>Sport Stacking Instructor</b> _____
<b>Parent/Guardian</b> _____		<b>WK PH#</b> (____) _____
<b>Hm/Cell PH#</b> (____) _____		<b>Email Address</b> _____

<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
<b>Relay Team Name</b> _____	
<b>Relay Team Division</b> (circle one)    6u    7u    8u    9u    10u    11u    12u    14u    18u    Open (19 & above)	
<i>Note: u = under</i>	
<b>Coach</b> _____	<b>Coach PH#</b> (____) _____ <b>Email</b> _____

### EARLY REGISTRATION FEE (Mailed by Friday, November 6<sup>th</sup>)

\$20 Applies to all competitors except "Special Stackers"

\$10 Additional late registration fee (if received after November 7<sup>th</sup>)

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

(Please make checks payable to **Village Baptist Church**)

For your convenience, you may register and pay by credit card online at [www.active.com](http://www.active.com). Processing fee applies for credit card transactions.

**PARENT AGREEMENT:** "I understand that my child will need to be supervised during the competition. Either my child's Relay Team Coach or I 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 stated above. The consideration I am to receive for my granting such rights is the right for my child to participate in the 2009 WSSA Oregon State Sport Stacking Championships."

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

Please give this Individual Registration form and fee, along with any forms ("Doubles" Registration, etc.) to your Relay Coach, who will collect all your team members' Individual & "Doubles forms, fill out the Relay Team Registration form and turn them all in to your Sport Stacking Instructor before **Friday, November 6<sup>th</sup>**.

Forms should be mailed to: Oregon State Sport Stacking, Attn Frank Tan c/o Village Baptist Church, 330 SW Murray Blvd., Beaverton, OR 97005.

**Questions?** Call—Frank Tan at 503-643-6511 or email at [frankt@vbconline.org](mailto:frankt@vbconline.org).

Information may also be acquired by visiting the [www.worldsportstackingassociation.org](http://www.worldsportstackingassociation.org) or [oregonsportstacking.blogspot.com](http://oregonsportstacking.blogspot.com)

<b>For Office Use</b>		Date entered: _____	Entered by: _____
Paid by:	<input type="checkbox"/> Check # _____	<input type="checkbox"/> Cash _____	Team: Yes / No
	<input type="checkbox"/> Charge _____ (ACTIVE.COM)		

