



2009 WSSA Mid-Atlantic Sport Stacking Championships RELAY TEAM Registration Form

One form per team please! Completed by the Coach.

Please Print

RELAY TEAM NAME _____

Coach _____ Home PH#(____) _____

Work PH# (____) _____ Cell PH# (____) _____

Email address _____

School/Organization _____ Sport Stacking Instructor _____ ST/PV/Country _____

AGE DIVISION (*circle one*) 6u 7u 8u 9u 10u 11u 12u 14u 18u Open (19 & above)

(Note: "u" = under)

TEAM RELAY EVENTS: Our team will compete in the following checked Relays (Three maximum) *The 6 & under Division participates in the 3-3-3 HTH Relay. All other divisions are encouraged to participate in the 3-6-3 & Cycle HTH Relays. (6 & under stackers who wish to compete in the 3-6-3 Relay may "play-up" into the 7u age division.) Make sure your team signs up for the Timed 3-6-3 Relay!!*

- 3-3-3 HTH Relay(6u only)
 3-6-3 HTH Relay
 Cycle HTH Relay
 Timed 3-6-3 Relay
 Special Stackers Timed 3-6-3 Relay

TEAM MEMBERS (*list all team members*)

First & last name	Age	Typical 3-6-3 time
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____

(#5 optional)

Teams must field a complete roster of at least 4 Stackers to compete. Teams with less than 4 Stackers will be disqualified. (Teams of 5 are encouraged, but not required, to assure participation in case a team member cannot attend the competition. If all 5 are present, the 5th Stacker can be rotated in.)

Coach Checklist:

- Read the Registration Packet thoroughly.
- Complete your child's Individual & "Doubles" Registration forms; assist with other team members Individual & "Doubles" Registration forms.
- Complete **one** Relay Team Registration Form.
- Call the parents of Stackers on your team; confirm each Stacker's participation. (Remember you must have at least 4 members to compete.)
- Gather up the Individual & "Doubles" Registration Forms and fees from the Stackers on your team.
- Turn in one completed Relay Team Registration Form, along with all Individual & "Doubles" Registration Forms, and fees to your Sport Stacking Instructor by Friday, January 9th. (The sooner the better.)
- Coordinate some practices for your team; expect to receive a "Championship Checklist" from your Sport Stacking Instructor with the WSSA Rule Book.
- Read through the WSSA Rule Book and understand all the rules.
- Work with your team to create a fun and coordinated team t-shirt (optional).



Date entered: _____

Entered by: _____

PAID: 1 _____

2 _____

3 _____

4 _____

5 _____

COACH AGREEMENT: I understand I'm responsible for the team and will supervise them during the competition. I commit to field at least four team members. (A team may consist of five members with substitutions.) I understand our team will be disqualified if less than four compete. I will read the WSSA Rule Book and understand all the rules of the competition including the use of the StackMat®. I look forward to a very positive and encouraging day at Laurel HS.

Coach Signature _____ Date _____

Thanks so much for volunteering to be a Coach! Your leadership and support are instrumental in making our tournament a successful and positive experience for all involved.