

## ALPINE SKIING AND SNOWBOARD ENTRY FORM

DO YOU PLAN ON  
ATTENDING STATE  
MARH 2 AND 3, 2019?

Region: \_\_\_\_\_ Day of Contact Number: \_\_\_\_\_

Team/Program: \_\_\_\_\_

Coach Name(s): \_\_\_\_\_

Coach E-mail(s): \_\_\_\_\_

YES                  NO

		GIANT SLALOM			SUPER G			SLALOM (State Only)		
Sport (circle or check)		:	.		:	.		Check or circle if planning on racing at State.	Yes	No
(Athlete/Partner Name)		min	sec	ths	min	sec	ths			
Alpine Ski										
(Gender) (DOB)		Level:	Novice		Check or circle if competing in the following	Loose Tether				
			Intermediate			Taut Tether				
			Advanced			Sit Ski				
(A or P)		Unified		List teammate:						

		GIANT SLALOM			SUPER G			SLALOM (State Only)		
Sport (circle or check)		:	.		:	.		Check or circle if planning on racing at State.	Yes	No
(Athlete/Partner Name)		min	sec	ths	min	sec	ths			
Alpine Ski										
(Gender) (DOB)		Level:	Novice		Check or circle if competing in the following	Loose Tether				
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