

# 2018 JUNIOR ACME REGISTRATION AND FEE

FEE: \$75 per team (non-refundable)

Due: May 15<sup>th</sup> No late entries accepted for participation in tournament play.

Send Fee and Registration To:

Kristi Spencer  
13432 Waynesfield Road  
Wapakoneta, Ohio 45895

TEAM NAME: \_\_\_\_\_

SCHOOL AFFILIATION: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

**Team Roster Certificate will be available April 15<sup>th</sup> and due June 1<sup>st</sup>**

<b><u>FOR OFFICE USE ONLY</u></b>							
Date Posted:	_____						
Date Received:	_____						
Amt Rec'd:	_____						
Mode of Payment:	_____	Cash					
	_____	Check (No. _____)					
	_____	Money Order (No. _____)					
	_____	PO (No. _____)					
District Assignment:	1	2	3	4	5	6	7