

# 2017 Adventure Race Entry Form



## Registration Instructions

1. Consult the sport information pages at [www.sunflowergames.com](http://www.sunflowergames.com) for complete registration instructions.
2. Mail completed entry form and payment to: Sunflower State Games, 501 SE Jefferson, Suite 22, Topeka, KS 66607. Fax to 785-235-1308 or Email to [admin@sunflowergames.com](mailto:admin@sunflowergames.com)
3. Registration deadline is July 15th. Entries received after the deadline will not be accepted or charged a \$15 late fee.
4. Team rosters **MUST** be submitted online by 6pm on Friday, July 21st. Rosters will be frozen at this time. Signed waiver forms **MUST** also be submitted to the SSG office by 6pm on Friday, July 21st. Signed waivers will not be accepted at the event. Teams not meeting the deadlines listed above will be pulled from the event and will NOT receive a refund.
5. New in 2017! Teams registered by July 15th will receive commemorative SSG towels.
6. Please visit [www.sunflowergames.com](http://www.sunflowergames.com) for complete instructions on submitting your Team Roster online, and to submit you Waiver Form to the SSG office.

### COACH/TEAM INFORMATION

Team Name: \_\_\_\_\_

Coach Name: (First) \_\_\_\_\_ (Last) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Evening Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Gender: M / F

I hereby certify that I know and understand the rules, policies and code of conduct for my sport in the Sunflower State Games. I certify that the ages/grade levels of all my players are within the limits of the age/grade division which we are entering. I also understand that my team may be disqualified from this tournament if any player's information is incorrectly noted on the official roster. By signing below I also agree to follow all Team Roster & Waiver submission procedures.

\_\_\_\_\_  
Coach Signature Date

### EVENT INFO.

*Please circle the appropriate division:*

<b>Male Solo (\$70)</b>	<b>Female Solo (\$70)</b>	
<b>Male 2 Person (\$120)</b>	<b>Female 2 Person (\$120)</b>	<b>Co-Ed 2 Person (\$120)</b>
<b>Male 3 Person (\$180)</b>	<b>Female 3 Person (\$180)</b>	<b>Co-Ed 3 Person (\$180)</b>

**IMPORTANT: Please review instructions on submitting your Team Roster and Signed Waiver form at [www.sunflowergames.com](http://www.sunflowergames.com)**

### PAYMENT INFO.

Entry Fee	\$ _____	Make check/money order payable to SSG or enter credit card information below.
2XL/3XL (\$2)	\$ _____	Check <input type="checkbox"/> Cash <input type="checkbox"/> Master Card <input type="checkbox"/> Visa <input type="checkbox"/>
Late Fee	\$ _____	Credit Card Number _____
Donation	\$ _____	Expiration Date _____ / _____
<b>TOTAL</b>	\$ _____	Name as it appears on card _____

**Absolutely NO Refunds given. Consult Bracket Fill Policy for more information.**

*Office use only*

PD \_\_\_\_\_ PM \_\_\_\_\_ Amount Received \_\_\_\_\_ Check # \_\_\_\_\_ ID# \_\_\_\_\_