

Summer Smash NSA Qualifier Tournament Entry Form

O'Fallon Community Athletic Club

Simply print as many copies of this page as necessary and mail it to:

O'Fallon Community Athletic Club
401 E. Wabash
OFallon, Missouri 63366
Phone: (636)978-7668 Fax: (636)980-3091

Circle Team Age Circle Rank June 2 & 3
AGE: 8 10 12 14 16 18 A / B

Team Name:
Manager:
Sanction Number:
Address:
City: State: Zip:
Home Phone: Cell Phone:
Fax: E-Mail:

Team Hotel/Motel Coordinator:
Address:
City: State: Zip:
Home Phone: Cell Phone:
Email:

Would like hotel information (Circle One) Yes No

8u machine \$225

10u thru 18u \$325

Total entry fees sent \$

Make checks payable to: OCAC