



APPLICATION - 2012

DATE: July 11 – 15, 2012
(WEDNESDAY – SUNDAY)

LOCATION: Irvine, California

Please enter my team in the CHAMPIONS CUP. My team is registered ASA in the following division:

____ Junior Olympic Showcase 18/Gold (entry fee - \$950.00)

Includes: COACHES CLINIC (ASU staff) and DINNER MEETING (TUESDAY - July 10, 2012) at Host Hotel

Additional Coaches Tickets Available at \$45.00 Each

Please add to Entry Fee: _____ Total Dollars Submitted

Includes: Wrist Bands for athletes (year of high school graduation) colors TBD

____ Competition Agreement (sign and submit)

____ Coaches Clinic and Managers Dinner Meeting Agreement (fill-in and submit)

____ Hotel Agreement (sign and submit - Out of Area Teams)

Team Name _____ Team Manager _____

Team Name (less than 13 character abbrev for championship bracket)

1 2 3 4 5 6 7 8 9 10 11 12 13

Street Address _____ City _____

State _____ Country _____ Zip/Postal Code _____

Phone _____ Fax _____ Cell _____

E-mail _____

Contact (1) Name _____ Cell _____ Email _____

Contact (2) Name _____ Cell _____ Email _____

PLEASE CHECK ONE:

____ Southern California ASA registered 18/Gold team

____ Other Areas (Teams REQUIRED to stay at 2012 approved hotels or add fee of \$400.00 with this application)

Checks payable to The Champlons Cup and mail to the address below by November 7, 2011.

Thank you!

The Champions Cup
265 Wake Forest Rd., Costa Mesa, CA 92626

jbollin24@att.net
www.ChampionsCup.org