

I wish to enter THE KNIGHTS OF COLUMBUS FREE THROW CHAMPIONSHIP in the category and age group checked below. My eligibility is to be determined by my age as of January 1. I also understand that I may only compete in one council level competition.

Secondary school athletes should check with the school athletic director about eligibility before participating. Birth Certificate for other proof of age is required to verify eligibility.

Boys Girls		AGE: 9	10 11	12 13	14	
Name of Entrant		D	ate of Birth			
Street Address						
City	State/Province	P	Postal Code			
Telephone	Signature of En	trant				
2. This Section To I	Be Completed By Parent,	/Guardian:	COT	UNCIL NO		
PIONSHIP. In consideration of su of entrant and the undersigned an members, agents and employees, expenses resulting from or relatin	The entrant may compete in	undersigned hereby agree: Jumbus Supreme Council y agree to release, idemnii only one council level cor	that entrant's p and any of its so fy and hold harr npetition.	participation will be at the ubordinate units and their	sole risk r officers, aims and	
Witness	Father/guardian	Date signed		and the second sec		
SCORE SHEE	T	3. T		n To Be Complete C Officials:	ed By	
SCORING INSTRUCTIONS: Each co other levels. Indicate number of free free throws until one contestant eme	throws "made" in first column. Tho	se tied for highest score w	ill compete in s			

COMPETITION LEVEL	SCORI	SCORING: 🗵 BASK		KET MADE 🛛 BASKET MIS		TOTAL BASKETS MADE
		00000		00000	00000	
	00000	00000	00000	00000	00000	
DISTRICT	00000		00000	00000	00000	
	00000	00000		00000	00000	
REGIONAL	00000		00000	00000		
	00000	00000	00000	00000	00000	
STATE	00000	00000	00000	00000	00000	
	00000	00000				