

## Metro Atlanta Scholastic Team Regional - Registration Form

This form is designed to be used by those schools entering students in one of three sections of the Scholastic Team Regional: Primary (K-3), Elementary (K-6), and Middle School (6-8). If a school is entering teams in more than one section, then a separate registration form should be used for each team.

SCHOOL \_\_\_\_\_ SECTION \_\_\_\_\_

SCHOOL ADDRESS \_\_\_\_\_

COACH or ADVISOR \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

TEAM ROSTER: (The number of players from any one school is unlimited.)

NAME	GRADE	BYE ROUNDS (if any, please circle)	USCF ID# (if a member)
1. _____	_____	1   2   3   4   5	_____
2. _____	_____	1   2   3   4   5	_____
3. _____	_____	1   2   3   4   5	_____
4. _____	_____	1   2   3   4   5	_____
5. _____	_____	1   2   3   4   5	_____
6. _____	_____	1   2   3   4   5	_____
7. _____	_____	1   2   3   4   5	_____
8. _____	_____	1   2   3   4   5	_____
9. _____	_____	1   2   3   4   5	_____
10. _____	_____	1   2   3   4   5	_____
11. _____	_____	1   2   3   4   5	_____
12. _____	_____	1   2   3   4   5	_____

Make check payable to: GCA  
 Mail to: GCA, PO Box 91, Tucker, GA 30085-0091