

Return to:

Mid-America Games, c/o Pat Dalton
P. O. Box 1342, Misson, KS 66202-1342

2017 MID-AMERICA GAMES EVENT ENTRY FORM

Team Name _____ Date of Birth ____/____/____/

If not on a team, please write "Independent"

mo day year

Athlete Name _____ SEX: F ____ M ____

Address _____

City _____ Disability: #1-CP* ____/ #2-LesAutres* ____/

State _____ Zip Code _____ #3-Spinal Cord ____/ #4-Other*** ____/

Telephone Number _____ * Includes head injuries and strokes.

Mobile Phone _____

E-mail address _____ Check with your coach for eligibility.

T-shirt size: S ____ M ____ L ____ XL ____ XXL ____

Please mark the events you are entering. MARK IN OPEN BOXES ONLY.

Friday - 6:00 PM and Saturday - 8:30 AM

Divisions of Play

Individual Boccia - BC 1	<input type="checkbox"/>
Individual Boccia - BC 2	<input type="checkbox"/>
Individual Boccia - BC 3	<input type="checkbox"/>
Individual Boccia - OPEN*	<input type="checkbox"/>

* OPEN boccia includes divisions BC 4, BC 5 and BC 6

Sunday 9:00 AM

Classification	1	2U	2L	3	4	5	6	7	8
Bowl, ramp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bowl w/o ramp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ENTRY FORM DEADLINE : MARCH 17, 2017