



SPEED – ROLLER SKATING ENTRY FORM



AREA #: _____ AGENCY: _____

Certified Coach Registered with SOGA: _____ Phone Number: _____

Scores submitted will used to division the FINAL ROUND of competition.
There will be NO Preliminary Round of competition!!

NO COACH WILL BE ALLOWED ON THE RINK DURING COMPETITION!

	ATHLETE'S LAST NAME	FIRST NAME	M or F	DOB	100 M Race	300 M Race	500 M Race
1					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
2					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
3					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
4					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
5					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
6					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
7					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
8					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
9					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____
10					Min. _____ Sec. _____	Min. _____ Sec. _____	Min. _____ Sec. _____

⇒ The athlete may enter two (2) events. Record the score(s) in the correct column.