



## LEVEL A BASKETBALL SKILLS ENTRY FORM

AREA #:	AGENCY:
<del>-</del>	
Certified Coach Registered with SOGA:	Phone Number:

	ATHLETE'S LAST NAME	FIRST NAME	M or F	DOB	ISC SCORE
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					

<sup>⇒</sup> THERE WILL BE **NO "PRACTICE" ROUND** OF COMPETITION AT STATE GAMES STARTING 2013!!!!

<sup>⇒</sup> The Individual Skills Contest scores will be used to place your athletes in a group of other athletes with similar ability.

 $<sup>\</sup>Rightarrow$  Please be as accurate as possible.