

## SOUTHWEST CHALLENGE Entry Form



Skill Contact Person





**TEAM NUMBER:**(assigned by APA)

## **\$636 Team Package Price** includes:

- ✓ 1 Room for 3 nights (Thu thru Sun)
- ✓ Tournament Entry Fee
- ✓ CompuSport & Green Fees

Registration: Thu, March 14 <sup>th</sup> 6:00 pm to midnight & Fri 7:30 am, Players Meeting 8:30 am & Tournament begins Friday 9 am

**TEAM NAME:** (assigned by APA)

- **★** 3-Person Teams, Skill Level Limit 14
- ★ Only one SL 6/7 per team, male 2s allowed
- \* APA 8-Ball, Race to 2 matches
- ★ Minimum ten APA 8- or 9-ball scores

Plaver #

- Must be on a 2024 Spring 8- or 9-ball APA roster
- **★** Modified single elimination
- \* Rotating shooting order

## PLEASE WRITE/TYPE ALL INFORMATION CLEARLY

Yes, we want a slot! Our team (in shooting order) is a follows:

Pla	yer Name	(8-dig		(Select One)
1.				
2.				
3.				
□ We wi	ill need additional rooms. (	\$108 per room/night for Thu or Sun	ı, \$158 per room/n	ight for Fri or Sat)
Room	Guest Name 1	Guest Name 2	Gues	t Name 3
1				

KOOIII	Guest Name 1	Guest Name 2	Guest Name 5
1.			
2.			

ΑŚ	deposit is enclosed /	associated with this entry	<b>, torm.</b> Select paym	ent method used:
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Mail check payable to:	□PayPal or □ Zelle to:	□ Venmo:	☐ Cash
Allison McGhie	southoc@apaleagues.com	@Allison-McGhie	

Slots will be allocated on a first-come, first-served basis. \$100 Deposit holds your

slot. For more information, contact the League Office at (949) 874-9860 or visit

southoc.apaleagues.com

\*Entry Deadline (and Skill Level cutoff) Friday, February 16th, 2024

(Additional fees for late entries, roster changes and cancellations)