

CALIFORNIA STATE GAMES 2018 INDIVIDUAL ENTRY FORM

REFER TO SPECIFIC SPORT INFORMATION BEFORE COMPLETING.
ALL APPLICANTS MUST SUBMIT A SIGNED WAIVER WITH THIS FORM.

LAST NAME

FIRST NAME

M.I.

STREET ADDRESS

CITY

STATE

ZIP

DAY PHONE

EMAIL

AGE

CELL PHONE

BIRTHDATE (Mo/Day/Yr)

Male Female
GENDER (Circle One)

SPORT

EVENT DESCRIPTION / DIVISION

Swim Time

2nd EVENT DESCRIPTION

Swim Time

3rd EVENT DESCRIPTION

Swim Time

4th EVENT DESCRIPTION

Swim Time

SPORT SPECIFIC INFORMATION

BMX, JUDO, SWIMMING, & WEIGHTLIFTING

JUDO

CLUB/SCHOOL/BMX TRACK

Coach / Instructor

BADMINTON / TABLE TENNIS

RATING (Circle one) A B C D

Belt Rank: _____

Weight: _____

Doubles Partner _____

Mixed Partner _____

Make Check or Money Order payable to:

Total Entry Fees: _____

Opening Ceremonies (\$10 each): _____

CSG Donation: _____

CALIFORNIA STATE GAMES
3260 Rosecrans St.
San Diego, CA 92110

TOTAL ENCLOSED: _____