CALIFORNIA STATE GAMES
2008 TEAM ENTRY FORM

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

TEAM NAME _____ CONTACT LAST NAME _____ FIRST NAME _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE – DAYTIME _____ PHONE - CELL _____ EMAIL _____

Make check or Money Order payable to:
CALIFORNIA STATE GAMES
3260 Rosecrans St.
San Diego, CA 92110

SPORT (CIRCLE ONE): **BASEBALL** **BASKETBALL** **GYMNASTICS** **JR. LIFEGUARDS**

Region: _____

SOCCER (AYSO/CYSA) **SOFTBALL** **SYNCHRO SWIM** **WATER POLO** **WRESTLING**

Total Entry Fees: _____
Open. Cerem. ($8 each): _____
Padres Game ($10): _____
CSG Donation: _____

TOTAL ENCLOSED: _____

_____
DIVISION / GENDER

TEAM ROSTER

			Wrestling		**Gymnastics**	**Synchronized Swimming**						
NAME	BIRTHDATE	HOMETOWN	Weight	USAG #	Level	Solo	Duet	Grp	Trio	Grp	Team	Grp