

Strasdin Orthodontics / ASA Event

Nitehawk Recreation Area

February 3-4, 2012

REGISTRATION FORM

COMPETITOR NAME: _____

DOB (DMY) _____ Age: _____

Male: ____ Female ____

Phone: _____ email: _____

Emergency Contact:

Name: _____ Phone: _____

Hometown: _____

Club: _____

Sponsors: _____

Nick Name: _____

Rider Bio: (For the announcer)

Please check:

Male

Female

12 and under _____

12 and under _____

13 -15 _____

13 -15 _____

16 and older _____

16 and older _____

Rail Jam \$20 _____

Slope Style \$20 _____

Bib no. _____ ASA number: _____ Cheque # or Cash \$ _____