

# FORM 3: Snowboarding Registration Form



Local Program: \_\_\_\_\_  
 Local Program Coordinator: \_\_\_\_\_  
 Sport: \_\_\_\_\_

**Head Coach:**

Last Name	First Name	Cell Phone	Email Address

(Required)

**\*Note: Times must be recorded as 00:00.00 (mm:ss.00). Registrations with missing information will not be accepted.**

**List of Athletes**

	First Name	Last Name	DOB	M/F	Level	Event Code	Time	Event Code	Time	Event Code	Time
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											

**NOTES:**

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**Event Codes:**      SBGSLA - Snowboard Giant Slalom      SBSLAL - Snowboard Slalom  
                              SBSPRG- Snowboard Super G Slalom      SBSGID - Snowboard Super Glide