



# TEAM FITTING CONTEST

## Entry Form

NAME	AGE
Team Member #1 _____	_____
Team Member #2 _____	_____
Team Member #3 _____	_____
Team Member #4 _____	_____

Please mail, email or text a photo of completed entry form to  
AJCA State Director on or before May 1, 2019

*or*

*Cleve Clark, AJCA State Director*

*2010 West Sumac Street*

*Rogers, AR 72758*

*or*

*479.936.4044*