

The Ohio Academic Competition O.A.C

APPENDIX D

LEAGUE REGISTRATION

(Please type or print clearly)

Name of League: _____

Date by which League Champion will be determined: _____

Names of Schools competing in League (8 minimum):

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |

Name of Tournament: _____ Date: _____

Names of Schools Competing in Tournament (8 minimum):

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |
| 7. _____ | 8. _____ |

Name of League or Tournament Director: _____

Address: _____ E-mail: _____

City, State, Zip: _____

Daytime Phone Number: _____ Cellular Phone Number: _____

Who is responsible for payment of the \$100.00 O.A.C. entry fee?

Winning High School _____

Tournament/League _____

NOTE: This form must be on file at Shawnee State University by **MARCH 19, 2010** by **5:00 p.m.** in order for teams winning your tournament or league to be allowed to compete in the 2010 Ohio Academic Competition. Forms received after the above date **may not** be accepted for competition.

Return Form To:
Shawnee State University
Ohio Academic Competition
Attn: Cathy Mullins
940 Second Street
Portsmouth, OH 45662