

NATIONAL SCRATCHES – INDIVIDUALS

To all club presidents: If there is an individual from your club who qualified for Nationals, but will not be attending, please record in the space below and submit with your national entry forms. This will greatly help in scheduling.

Team Name: _____ City, State: _____

Club ID: _____ Contact Phone: _____ Date: _____

Name(s)	Division	Regional Placement

Signed by Club President: _____

Printed Name: _____