



Scholastic Action Shooting Program





Team Name:						
Facility Name:						
Facility Address: (no PO Boxes)						
Facility City:		State:	Zip:			
Contact Name:		Contact Phone:				
Fax Number:		E-Mail Address:				
High School*: Yes No	School Name:					
Facility Official Mailing Address (if different than above):						

if Yes, you* **MUST *submit on school letterhead verification that Team is recognized as a sponsored school team or club, signed by Principal or Athletic Director.*

Disciplines:

Rimfire - Pistol	Iron Sight - Rifle	Open Class – (Collegiate) Pistol
Centerfire - Pistol	Optic Sight - Rifle	

Important – Please Read and Heed

Coaches Please Note:

No Coach or Athlete will be considered an SASP Member until their completed registration form is entered on-line (www.sssfonline.org) and a copy on file at SASP Headquarters.

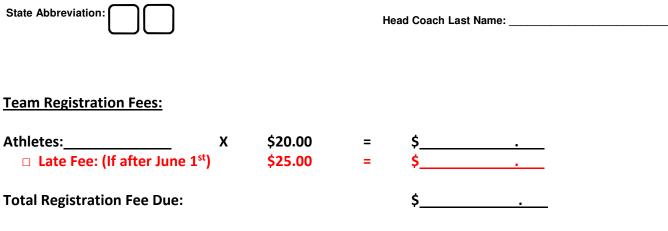
Initial Team Registration Requirements:

- Full Squad: Four (4) registered Athletes.
- Additional Athletes may be registered at any time.

Required Forms:

- Athlete Consent & Waiver Form: Completed & signed by the athlete and a parent / legal guardian.
- Medical Consent Form: Signed by athlete and a parent / legal guardian.
- **Sportsmanship Contract:** Signed by athlete and a parent / legal guardian.

Note: Athletes 18 years of age or older are not required to have a parent or legal guardian sign the Athlete Consent & Waiver Form, but the athlete does need to sign the form. Submission of this form is required.



Scholastic Trust Endowment:

For Scholastic Trust Endowment Account Purposes Only. Please list the qualified school that best represents your team.

Qualifying School or Midway Trust Account Name:								
Address: (no PO Boxes)								
City:	State:	Zip:						

Complete Team Registration:

To complete team registration, payment can be made on-line with credit card or by check (payable to SSSF) through the U.S. Mail. Once the Head Coach completes their online registration (www.sssfonline.org) and has their annual background check approved, you will be able to begin entering your team information. Only the Athlete Registration Consent & Waiver Forms must be submitted to Headquarters. If the coach has no access to the web, this form, Coach Registration and all accompanying Athlete Registration Consent & Waiver Forms must be received at least 10 days prior to the designated date of your SASP State Championship Shoot or June 1, whichever comes first.

Mail To: SSSF / SASP Headquarters N65W7335 Cleveland Street Cedarburg, WI 53012-1856

New team referred to SASP by: _____

SASP Coach Name and Team Name