

State Abbreviation:

Head Coach Last Name: \_\_\_\_\_



**Scholastic Clay Target Program**  
2018-19 College Team Registration  
Form



<b>College / University Name:</b>	
<b>Type:</b> <input type="checkbox"/> 4-Year <input type="checkbox"/> 2-Year	<b>Are you affiliated with the ACUI?</b> Yes   No

**Head Coach:**

<b>First Name:</b>	<b>Last Name:</b>	
<b>Address:</b> (Home)		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Home Phone:</b>	<b>Cell Phone:</b>	
<b>E-Mail Address:</b>		

**Student Advisor / Club President:**

<b>First Name:</b>	<b>Last Name:</b>	
<b>Address:</b> (Home)		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>
<b>Home Phone:</b>	<b>Cell Phone:</b>	
<b>E-Mail Address:</b>		

*\*if endorsed as an official sport, please submit on school letterhead verification that Team is recognized as a sponsored school team or club, signed by Athletic Director.*

➡ **Important – Please Read and Heed** ⬅

**SCTP Season: September 1<sup>st</sup> – August 31<sup>st</sup>:**

Team Registration will open on September 1. Collegiate Team Registration closes for the season: (1) Thirty (30) days prior to each discipline's SCTP State Championship, (2) any Collegiate Shoot receiving SCTP Endowment Monies, or (3) February 1, whichever comes first.

**Coaches Please Note:**

No Coach or Athlete will be considered an SCTP Member until their completed registration form is entered on-line ([www.sssfonline.com](http://www.sssfonline.com)) and a copy on file at SCTP Headquarters.

**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.

**Team Registration Fees:**

Athletes: \_\_\_\_\_ X \$20.00 = \$ \_\_\_\_\_.

**Late Fee: (If after Feb. 1<sup>st</sup>)** \$25.00 = \$ \_\_\_\_\_.

**Total Registration Fee Due:** \_\_\_\_\_  
\$

**Scholastic Trust Endowment:**

**For Scholastic Trust Endowment Account Purposes Only.** Please list the qualified school that best represents your team. You must have five (5) shooters that attend the listed school.

<b>Qualifying School or SST Account Name:</b>		
<b>Address:</b> <small>(no PO Boxes)</small>		
<b>City:</b>	<b>State:</b>	<b>Zip:</b>

**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.com](http://www.sssfonline.com)) 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 submitted. **In either case, the required (1) Thirty (30) days prior to each discipline’s SCTP State Championship, (2) any Collegiate Shoot receiving SCTP Endowment Monies, or (3) February 1, whichever comes first.**

**Mail To:** SCTP Headquarters  
165 Bay Ridge Lane  
Burlington, WI 53105