



**2019 Wisconsin ACS
8-Ball Championships**
Scotch Doubles Competition Entry Application
☆ Competition Dates: November 7-10, 2019 ☆

**NOTE: All events are pre-registered – Open to ALL WI ACS and Border-State ACS League members.
Must postmark or post online your entry by no later than Monday, October 21, 2019 !
Most recent stats must accompany this completed entry form./ Reserve hotel room by 10/30/19 !**

PLAYER STATUS: (you must check box)

Current ACS League Members
League (Man) _____
League # _____ Rating (circle one): Master/AA/Open (A)/Standard (B/C)
League (Woman) _____
League # _____ Rating: (circle one) Master/AA/Open (A)/Standard (B)
Teams in Scotch Doubles divisions must be composed of one man and one woman from any ACS Wisconsin-based or border-state ACS league (need not be from the same ACS league) who have both played a minimum of two (2) full matches over a minimum two (2) weeks during one sanctioned session in a qualifying ACS league since 6/1/19.

PLEASE ATTACH LEAGUE STATS VERIFYING ELIGIBILITY!

NEW! 2 Scotch Doubles Divisions!
(Check only one)

Entry Fee
(Postmarked by 10/21/19)

Advanced (Fargo/MPS total 1000 or more \$60
or the equivalent) // [If a 100 pt. difference, higher races to 4/lower races to 3] // \$20 goes towards greens fee
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Open (Fargo/MPS total 999 or less \$45
or the equivalent) // [If a 100 pt. difference, higher races to 4/lower races to 3] // \$15 goes towards greens fee

WOMAN'S NAME _____ **M.I.** **LAST NAME** _____
STREET ADDRESS _____
CITY _____ **ST.** _____ **ZIP CODE** _____
DAYTIME PHONE _____ ALTERNATE PHONE _____
EMAIL ADDRESS _____

MAN'S NAME _____ **M.I.** **LAST NAME** _____
STREET ADDRESS _____
CITY _____ **ST.** _____ **ZIP CODE** _____
DAYTIME PHONE _____ ALTERNATE PHONE _____
EMAIL ADDRESS _____

PAYMENT (CHECK ONE) CHECK CASHIER'S CHECK MONEY ORDER CREDIT CARD PAYPAL ONLINE

Scotch Doubles Entry Fees made out to "American CueSports Alliance"

NO entries will be accepted if postmarked/entered online after October 21, 2019. / Unsure of Rating ? – Contact ACS.

Mail this form to: AMERICAN CUESPORTS ALLIANCE
WIACS TOURNAMENT ENTRY
101 S. MILITARY AVE., STE. P - #131
GREEN BAY, WI 54303
TEL: 920-662-1705/ FAX: 920-662-1706
info@americancuesports.org
www.americancuesports.org

CREDIT CARD #: _____ - _____ - _____ - _____
EXPIRATION DATE: _____ / _____
AMOUNT TO BE CHARGED: \$ _____
+ 5% ACS finance fee for credit card/ PayPal entries
CARDHOLDERS NAME ON CARD: _____
CARDHOLDERS SIGNATURE: _____

I verify with my signature below that my teammate and I are current members in a league sanctioned with the American CueSports Alliance (ACS) and that neither of us are professional players by definition of the ACS. We have read and agree to abide by the rules and regulations that appear on this entry form and to all other regulations implemented by the American CueSports Alliance. By signing this entry form on behalf of myself and my Scotch Doubles teammate, I am giving our express permission for the ACS to use our photograph for reporting and promotional purposes.

Player Signature _____ Date _____