

PAIRING OFFICIALS SIGN-IN SHEET – 2018.2019

Please print legibly

TOURNAMENT _____ DATE: _____

.....

Name _____ Address: _____

City _____ Zip _____ Phone _____

E-mail _____ Section _____ Rank _____ Shirt Size _____

I will work the following state final tournaments (please check)

☐ Folkstyle (March 9-10th) ☐ ISWA Freestyle/Greco (May 4-5th)

Name _____ Address: _____

City _____ Zip _____ Phone _____

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***Please have all pairing officials working your event fill out the enclosed sheet.
(You will need to make copies) Return the completed forms in the envelope provided to:
ISWA, P.O. Box 157, BEECH GROVE, IN 46107***