

2026 STATE CORNHOLE TOURNAMENT ATHLETE EVENT REGISTRATION

Name of Delegation: _____

Team ID: Assign a 2-digit number for each Team beginning with 01.

A = Athlete UP = Unified Partner

TEAM ID: _____	Traditional <input type="checkbox"/>	Unified <input type="checkbox"/>	18' <input type="checkbox"/>	21' <input type="checkbox"/>	27' <input type="checkbox"/>	
			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____

TEAM ID: _____	Traditional <input type="checkbox"/>	Unified <input type="checkbox"/>	18' <input type="checkbox"/>	21' <input type="checkbox"/>	27' <input type="checkbox"/>	
			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____

TEAM ID: _____	Traditional <input type="checkbox"/>	Unified <input type="checkbox"/>	18' <input type="checkbox"/>	21' <input type="checkbox"/>	27' <input type="checkbox"/>	
			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____

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			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____

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			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____

TEAM ID: _____	Traditional <input type="checkbox"/>	Unified <input type="checkbox"/>	18' <input type="checkbox"/>	21' <input type="checkbox"/>	27' <input type="checkbox"/>	
			M/F:	AGE:	Qualifying Score:	Total Score
1. A	_____	_____	_____	_____	_____	_____
2. A / UP	_____	_____	_____	_____	_____	_____