



2024 IOWA ACS CHAMPIONSHIPS

Wednesday - Sunday, October 16-20, 2024

Team 8-Ball & 9-Ball Entry

NOTE: Submit your entry and stats to your League Operator no later than Monday, Sept. 2, 2024

League Name _____
League Operator _____
City _____ State _____
Phone _____ Email _____
League Operator Signature (required):

Men's 8-Ball Team (4-person) \$240
 Women's 8-Ball Team (4-person) \$240
 Open 9-Ball Team (3-person) \$ 60

(Above entries include greens fee and admin fee)

Team Name _____

_____ **Additional team members on reverse side of form**

1). Captain _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

5). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

2). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

6). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

3). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

7). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

4). Name _____ M / F
Address _____
City _____ State _____ Zip _____
Phone No. _____
Email _____
League Qualified From _____
Team Name _____
Session _____ Player Rating _____

Total Payment _____ **Check** _____ or **Money Order** _____
(payable to your League Operator)

League Operator must enter in CompuSport and send all entry forms & check (payable to Iowa ACS) to: Iowa ACS Treasurer
3855 Raleigh Avenue
Bettendorf IA 52722.

By signing below, on behalf of my team, I have read and agree to abide by the rules and regulations set forth in the Iowa ACS Tournament Guidelines published on the website and enforced by the Iowa ACS Tournament Committee. Tournament guidelines, flyers, and entry forms may be downloaded at www.iowaacs.com. For additional information and/or questions, call the ACS Secretary at 309-314-0956.

Team Captain Signature: _____ Date: _____