

**ACS ILLINOIS STATE ASSOCIATION
2025 EIGHTBALL CHAMPIONSHIPS
Team Entry Form**

ACSISA use only	
Type	_____
Amount	_____
Bal Due	_____
Refund Due	_____

League Name _____

League Operator _____

Team Name _____

**** ALL ENTRIES SHOULD INCLUDE A COPY OF THE LEAGUE STATS SHOWING EACH PLAYER'S ELIGIBILITY.
** ENTRIES WITHOUT PAYMENT WILL NOT BE ENTERED INTO THE TOURNAMENT UNTIL PAID IN FULL, INCLUDING LATE FEES, NO EXCEPTIONS!
** NO TEAM ROSTER CHANGES AFTER MARCH 14, 2025
** ALL PLAYERS ON ROSTER MUST HAVE THEIR 6 WEEKS PLAYED BY MARCH 9, 2024**

Event entry fee includes a registration fee and a greens fee

Event	* Early Bird by 1/27	Entry by 2/24	Late Entry 2/25 - 3/4
Men's Standard	<input type="checkbox"/> \$ 190	<input type="checkbox"/> \$ 210	<input type="checkbox"/> \$ 235
Women's Standard	<input type="checkbox"/> \$ 190	<input type="checkbox"/> \$ 210	<input type="checkbox"/> \$ 235
Open Team	<input type="checkbox"/> \$ 260	<input type="checkbox"/> \$ 285	<input type="checkbox"/> \$ 310
Women's Open	<input type="checkbox"/> \$ 210	<input type="checkbox"/> \$ 230	<input type="checkbox"/> \$ 255
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* EARLY BIRD entries postmark by - January 27, 2025

No late charge postmark deadline - February 24, 2025

Late charge of \$25 per event begins - February 25, 2025

Last chance to enter postmark deadline - March 4, 2025

Make checks payable to: ACSISA

Mail to: Dan Taylor - ACSISA, P.O. Box 1317, Bridgeview, IL 60455

Please check one

Players that make up the Core Team must have played together on the same team, during the same session, for a minimum of six (6) weeks.

Capt	_____
Address	_____
City	_____ State _____
Zip	_____ Phone _____
Core Team Player?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Core/Team played on during league session	_____
Session QUALIFIED in:	<input type="checkbox"/> Summer 2024 <input type="checkbox"/> Fall 2024 <input type="checkbox"/> Spring 2025

Name	_____
Address	_____
City	_____ State _____
Zip	_____ Phone _____
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Session QUALIFIED in:	<input type="checkbox"/> Summer 2024 <input type="checkbox"/> Fall 2024 <input type="checkbox"/> Spring 2025

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