



## All Star Team Registration Form

Team Name: \_\_\_\_\_

State: \_\_\_\_\_

Representing Darts Company/Area: \_\_\_\_\_

Format: *Open*      Dart Type (circle): *Steel / Soft*

**Preregister and Payment due by Wednesday, July 1<sup>st</sup> 2017**

Team Captain \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ E-mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Player #2 \_\_\_\_\_ Telephone: \_\_\_\_\_

Player #3 \_\_\_\_\_ Telephone: \_\_\_\_\_

Player #4 \_\_\_\_\_ Telephone: \_\_\_\_\_

Player #5 \_\_\_\_\_ Telephone: \_\_\_\_\_

Player #6 \_\_\_\_\_ Telephone: \_\_\_\_\_

**\* Each team must have at least two females on this roster.  
All above rostered members must participate and be current ADA members**

**\$10,000\***

**Soft Tip / Steel Tip**

**Wednesday, July 30<sup>th</sup> Time 2:30pm**

**Sheraton Westport Chalet, St. Louis MO**

**\*By submitting a team we have read and agree to abide by all  
ADA All Star Rules and Regulations.**

**For complete All Star information visit:**

**[www.adadarters.com](http://www.adadarters.com)**