

# **SWAT PAINTBALL**

## **Event Entry Form**

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

**Team Captain:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Phone #'s:** \_\_\_\_\_

\_\_\_\_\_

**Event Date:** \_\_\_\_\_

**Division Entered:**

Open: \_\_\_ Newbie: \_\_\_ Blind Draw: \_\_\_ Other: \_\_\_

**Method of Payment:** \_\_\_\_\_

\* Payments can be mailed or called in or made in person, but all should be done prior to Event.

Registration Cutoff will be 48 hours prior to event date.

All Checks should be sent to:

**SWAT Inc**

**Tournament Registration**

**1939 Pass Road**

**Biloxi, MS 39531**

Phone toll free 1-877-511-1459 local 228-872-1459