



# Kitsap County Cornhole Classic Player Registration

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

Team Member 1: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Team Member 2: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Providing your email address allows us to update you with important information regarding this event. We will never sell your email address to third parties.

Return this registration form with payment to :



South Kitsap Chamber of Commerce  
1014 Bay Street # 3  
Port Orchard, WA 98366

Preliminary Tournament : \_\_\_\_\_

Fee: \_\_\_\_\_ Payment Method: \_\_\_\_\_

Team #



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