

APPENDIX



Elks Soccer Shoot®



Contestant Score Sheet

5-Goal Contest: U-8 & U-10

Event Location:	Date:
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(Circle One in Each Category)

BOYS _____ GIRLS		
Lodge	District	State

<u>Division</u>	
7 & Under	8-9

Name:
Telephone No.:

<u>Age as of August 1</u>

CONTESTANT: DO NOT WRITE BELOW THIS LINE!! (For Official Use Only!)

Goal No. 1 – 48-inch width (X for each shot made) (– for each shot missed)		
SHOT 1)	SHOT 2)	SHOT 3)
Goal No. 2 – 40-inch width (X for each shot made) (– for each shot missed)		
SHOT 1)	SHOT 2)	SHOT 3)
Goal No. 3 – 34-inch width (X for each shot made) (– for each shot missed)		
SHOT 1)	SHOT 2)	SHOT 3)
Goal No. 4 – 26-inch width (X for each shot made) (– for each shot missed)		
SHOT 1)	SHOT 2)	SHOT 3)
Goal No. 5 – 17-inch width (X for each shot made) (– for each shot missed)		
SHOT 1)	SHOT 2)	SHOT 3)

Total Goals	× 1 =	Goal #1 Score
Total Goals	× 2 =	Goal #2 Score
Total Goals	× 3 =	Goal #3 Score
Total Goals	× 4 =	Goal #4 Score
Total Goals	× 5 =	Goal #5 Score

SCORE

Tie Breaker Section

(17-inch Goal Only) (X for each shot made) (– for each shot missed)

1	2	3	4	5	Total Goals

1	2	3	4	5	Total Goals

1	2	3	4	5	Total Goals

1	2	3	4	5	Total Goals

1	2	3	4	5	Total Goals

1	2	3	4	5	Total Goals



Elks Soccer Shoot®



Contestant Score Sheet

Grid Goal Contest: U-12 & U-14

Event Location:

Date:

(Circle One in Each Category)

BOYS

GIRLS

Lodge

District

State

Division

10 & 11 [U-12]

12 & 13 [U-14]

Name:

Telephone No.:

Age as of August 1

CONTESTANT: DO NOT WRITE BELOW THIS LINE!! (For Official Use Only!)

Indicate Actual Number of Points Scored for Each Shot

SHOT 1) _____	SHOT 6) _____	SHOT 11) _____
SHOT 2) _____	SHOT 7) _____	SHOT 12) _____
SHOT 3) _____	SHOT 8) _____	SHOT 13) _____
SHOT 4) _____	SHOT 9) _____	SHOT 14) _____
SHOT 5) _____	SHOT 10) _____	SHOT 15) _____

SCORE

Tie Breaker Section

(Indicate Actual Points Scored for Each Shot)

1	2	3	4	5	Total

1	2	3	4	5	Total

1	2	3	4	5	Total

1	2	3	4	5	Total

1	2	3	4	5	Total

1	2	3	4	5	Total

REGISTRATION APPLICATION

B.P.O. ELKS

"SOCCER SHOOT"®

GOAL SHOOTING CONTEST

For boys and girls up to age 13

APPLICANT CAN PARTICIPATE IN ONE LODGE CONTEST ONLY

(PLEASE FILL OUT IN DETAIL)

Boy

Girl

DATE OF BIRTH _____ (Month) _____ (Day) _____ (Year)

Please circle Correct Age you will be on

AUGUST 1, 200 _____ (Fill in appropriate year)

4 5 6 7 8 9 10 11 12 13

APPLICANT'S NAME: _____ (Please print or type)

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

() Home Phone () Mom Work () Dad Work

NAME OF APPLICANTS _____ PARENTS _____ Mother _____

OR _____ GUARDIANS _____ Father _____

ELKS LODGE _____ NO. _____ DATE _____

REQUEST AND CONDITIONS FOR REGISTRATION

The undersigned, parent/guardian of the above named applicant, hereby requests applicant's registration in the B.P.O. Elks "Soccer Shoot" @ GOAL SHOOTING CONTEST and represents the information set forth in this Application is correct. In consideration of such registration and the right of the applicant to participate in the competition, the undersigned does hereby acknowledge and agree that such participation will be solely at the risk of the applicant and the undersigned and without liability to the Benevolent and Protective Order of Elks of the United States of America, its State Associations, its Subordinate Lodges and the officers and members of them (hereinafter collectively referred to as "BPOE"). The undersigned, for himself, his personal representatives and successors, does hereby release and forever discharge BPOE from any and all claims, demands, liabilities, obligations, damages, costs, expenses, loss of service, actions and causes of action including each and every right of payment for damages said undersigned may now or hereafter have against BPOE arising out of any act or occurrence incident to the applicant's said participation and/or the engagement of the undersigned in connection therewith. The undersigned hereby consents and authorizes BPOE to use and reproduce applicant's name and/or likeness and to circulate the same for any and all purposes reasonably related to the conduct and promotion of the said competition, and the undersigned does hereby agree to indemnify and hold BPOE harmless from any and all claims, loss or damage to the BPOE resulting from or related to applicant's said participation. I have read, understood, and followed the rules of the "Soccer Shoot" contest.

(Signature of applicant)

Signature of Parent (Mother)

OR _____
(Father)

THIS MUST BE FILLED OUT BY THE RESPECTIVE DESIGNATED PEOPLE AS SHOWN BELOW. PLEASE PRINT.

EXALTED RULER

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (Area) _____

SUBORDINATE LODGE DIRECTOR

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (Area) _____ SCORE _____

Document checked by _____ Date _____ Lodge _____

Age verified by _____ Date _____

DISTRICT DIRECTOR

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (Area) _____ SCORE _____

STATE DIRECTOR

Name _____

Address _____

City _____ State _____ Zip _____

Telephone (Area) _____ SCORE _____

NOTE: ALL entrants are requested to contact their school principal or coach to determine if any restrictions or eligibility requirements exist in their state. Signatures verify information supplied on this card is correct.



Elks Soccer Shoot®

Competition Form — Boys/Girls



Please let us know who will compete as your representative at the next level.
Complete and return not later than 5 days after your Elks Soccer Shoot® Contest
to the Director of the next level of competition:

This is the information needed to adequately prepare for the next level of competition.

Sponsoring Lodge:

No.:

(Circle One in Each Category)

GENDER GROUP		NEXT LEVEL OF COMPETITION	
BOYS	GIRLS	District	State

Division U-8	Ages 7 & Under	Total Number of Participants and Guests Attending Next Competition
Name:	Date of Birth:	
Address:	Telephone:	
City:	State: ZIP:	
Parent Name:		

Division U-10	Ages 8 & 9	Total Number of Participants and Guests Attending Next Competition
Name:	Date of Birth:	
Address:	Telephone:	
City:	State: ZIP:	
Parent Name:		

Division U-12	Ages 10 & 11	Total Number of Participants and Guests Attending Next Competition
Name:	Date of Birth:	
Address:	Telephone:	
City:	State: ZIP:	
Parent Name:		

Division U-14	Ages 12 & 13	Total Number of Participants and Guests Attending Next Competition
Name:	Date of Birth:	
Address:	Telephone:	
City:	State: ZIP:	
Parent Name:		



Elks Soccer Shoot®



Contest Event Report

No later than 5 days after your Elks Soccer Shoot® Contest has taken place, complete this Contest Event Report and two **COMPETITION FORMS** (for **BOY** and **GIRL WINNERS**), and forward to the Director of the next level of competition.

COMPETITION DATE:			
Report for	Lodge	District	State
	(Circle One)		

Lodge:		No.:	
District:			
State:			
Competition Director:		Telephone:	
Address:			
City:		State:	ZIP:
Competition Location:			

Attendance: *This information is vital to the Program's future. Please Report Completely.*

Parents & Family	Additional Spectators		Volunteers		Contestants								
	Elks	Non-Elks	Elks	Non-Elks	U-8		U-10		U-12		U-14		
					Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	

Description	Total Expenses	Total Contributions	Total Income	Volunteers	
Competition				Elk volunteer hours	
Advertising/Costs				Non-Elk volunteer hours	
Awards/Prizes/Certificates				Elk volunteer miles	
Lodging				Non-Elk volunteer miles	
Meals/Snacks, etc.				Attach additional support as required.	
Admin.—supplies, copies, postage, etc.					
Miscellaneous					
Total					