



**For Juniors:**

Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_

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**For Parents / Guardians:** *(A Parent or guardian must sign on their behalf if the participant is a minor - under the age of 18)*

Print your name: \_\_\_\_\_

Please sign your name: \_\_\_\_\_

Street: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Text: \_\_\_\_\_

**Print this document, fill the form and**

**Email to:** Pono Tokioka at [usdga.vicepresident@gmail.com](mailto:usdga.vicepresident@gmail.com)