



FOR ENTRY FORM AND REGISTRATION INFORMATION:

Contact: _____ Bill Corcoran _____ Phone: _____ (847)727-4527 _____

Date of Competition: _____ Saturday, 2nd of February _____ Time: _____ 9:00 AM - 12:00 PM _____

Location: _____ Saint Catherine of Siena School - Gym _____

Sponsored by: _____ Knights of Columbus, Council #8596 _____

PLEASE NOTE: ENTRANTS MAY COMPETE IN ONLY ONE LOCAL COMPETITION.