



2019 OPA MAIL IN REGISTRATION FORM

Please mail this form to OPA 25346 Pokagon Hwy, Cassopolis, MI 49031

Checks Payable to **OPA**

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE NUMBER: _____

GENDER: MALE ___ FEMALE ___

CLASSES: (All Sr. Classes are 50 years of age, Young Adult Classes are 13-16 yr old. If this registration is received after July 8th 2019 there will be a \$50 charge for late registration for all adult classes.)

- 1) MENS EXPERT \$500 ___
- 2) WOMENS EXPERT \$375 ___
- 3) MENS SR EXPERT \$375 ___
- 4) MENS OPEN \$150 ___
- 5) WOMENS OPEN \$150 ___
- 6) MENS SR OPEN \$150 ___
- 7) YOUNG ADULT MALE \$50 ___
- 8) YOUNG ADULT FEMALE \$50 ___