

## Knights of Columbus - Soccer Challenge Contest Report - Council Winners

Grand Knights please complete this form immediately following your Soccer Challenge contest, mail the original to the State Youth Activities Director: James B. Scherer, 121 Crestview Court, Lansing Kansas 66043-1414

Please type or print and be sure all names are correctly spelled.

Your Name: _____	Council No.: _____
Address: _____	District No.: _____
City: _____	Contest Date: _____
State: _____ Zip Code: _____	Total # of Participants: _____
Phone Number: _____	

### Girls

Age	Contestant	Date of Birth	Parent/Guardian	Phone No.	Council	Score
10	Name:					
	Address:					
11	Name:					
	Address:					
12	Name:					
	Address:					
13	Name:					
	Address:					
14	Name:					
	Address:					

### Boys

Age	Contestant	Date of Birth	Parent/Guardian	Phone No.	Council	Score
10	Name:					
	Address:					
11	Name:					
	Address:					
12	Name:					
	Address:					
13	Name:					
	Address:					
14	Name:					
	Address:					