

# QUALIFYING TOURNAMENT (3A-2A BOYS AND GIRLS)

(PLEASE PRINT OR TYPE)

Boys/Girls \_\_\_\_\_ Class \_\_\_\_\_

Manager \_\_\_\_\_ Golf Course \_\_\_\_\_

1. The top six teams and teams tied for sixth place according to score will qualify for the regional tournament.
2. The top six individuals and those individuals tied for sixth place who are not on a qualifying team will qualify for the regional tournament.

## TEAMS

TEAM 1 \_\_\_\_\_ TEAM 2 \_\_\_\_\_

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
| 4. _____ | 4. _____ |
| 5. _____ | 5. _____ |

TEAM 3 \_\_\_\_\_ TEAM 4 \_\_\_\_\_

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
| 4. _____ | 4. _____ |
| 5. _____ | 5. _____ |

TEAM 5 \_\_\_\_\_ TEAM 6 \_\_\_\_\_

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
| 4. _____ | 4. _____ |
| 5. _____ | 5. _____ |

(if applicable) TEAM 6 \_\_\_\_\_ (if applicable) TEAM 6 \_\_\_\_\_

- |          |          |
|----------|----------|
| 1. _____ | 1. _____ |
| 2. _____ | 2. _____ |
| 3. _____ | 3. _____ |
| 4. _____ | 4. _____ |
| 5. _____ | 5. _____ |

**TOP SIX INDIVIDUALS**

	Name	School	Score
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
	if applicable _____	_____	_____
	if applicable _____	_____	_____

**TOTAL NUMBER OF PLAYERS** \_\_\_\_\_

**NOTE: Qualifying managers, please use this form in listing qualifiers for the regional tournament. Email a copy to Michelle Goolsby, [mgoolsby@ossaa.com](mailto:mgoolsby@ossaa.com) asap.**