AMPS
Master Administration Form

Registration Number: _____

Name: _____

Address: _____

_____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Club: _____ AMPS Membership Number: _____

Skill Level: ☐ Junior ☐ Basic ☐ Intermediate ☐ Advanced ☐ Master

Entry Letter	Category	Entry Title	Scale
A			
B			
C			
D			
E			
F			
G			
H			
I			
J			
K			
L			
M			
N			
O			
P			
Q			
R			

For AMPS Staff Use – Do Not Fill In:

☐ Skill Level Suitability Checked ☐ Category Eligibility Checked ☐ Category Suitability Checked

☐ Skill Levels Match on Master Admin ☐ Best Of Eligibility Checked ☐ Top & Bottom of Entry Forms Match

☐ Entry Letters Match on Master Admin ☐ Categories Match on Master Admin ☐ Scales Match on Master Admin