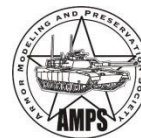


AMPS

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 |