

# ACF STUDENT TEAM COMPETITION TEAM INFORMATION SHEET

Region: \_\_\_\_\_

ACF Chapter: \_\_\_\_\_

School Affiliation: \_\_\_\_\_

Team Coach: \_\_\_\_\_ ACF Member #: \_\_\_\_\_

Phone (day): \_\_\_\_\_ E-mail: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_ ACF Member #: \_\_\_\_\_

Phone (day): \_\_\_\_\_ E-mail: \_\_\_\_\_

## Team Members

Captain \_\_\_\_\_ ACF Member # \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Alternate: \_\_\_\_\_

**Forms must be submitted to the ACF national office at least 30 days prior to local, state and regional competitions.**

**NOTE: All team members must have an ACF member number and be paid members, in good standing, at time of submission. (See page 31, Team Requirements)**

### Mail Form to:

American Culinary Federation  
ATTN: Events Management  
180 Center Place Way  
St. Augustine, FL 32095

### or fax to:

904-825-4758