

# ENTRY FEE \$100 2010 Rocket Classic

 MALE

 FEMALE

Team Name: \_\_\_\_\_

<b>CAPTAIN</b> (Please Print)	<b>PLAYER #2</b> (Please Print)	<b>PLAYER #3</b> (Please Print)	<b>PLAYER #4</b> (Please Print)
Name	Name	Name	Name
Address	Address	Address	Address
City      State      Zip	City      State      Zip	City      State      Zip	City      State      Zip
/ /      ( ) Birthdate      Phone	/ /      ( ) Birthdate      Phone	/ /      ( ) Birthdate      Phone	/ /      ( ) Birthdate      Phone
<b>Age at Start- of Tournament</b> Height IMPORTANT	<b>Age at Start- of Tournament</b> Height IMPORTANT	<b>Age at Start- of Tournament</b> Height IMPORTANT	<b>Age at Start- of Tournament</b> Height IMPORTANT
T-Shirt Size (circle size)	T-Shirt Size (circle size)	T-Shirt Size (circle size)	T-Shirt Size (circle size)
Youth L – Adult S – M – L – XL XXL	Youth L – Adult S – M – L – XL XXL	Youth L – Adult S – M – L – XL XXL	Youth L – Adult S – M – L – XL XXL
Signature (Parents signature if under 18)	Signature (Parents signature if under 18)	Signature (Parents signature if under 18)	Signature (Parents signature if under 18)
Be sure to provide accurate information. False information may lead to team disqualification.	Be sure to provide accurate information. False information may lead to team disqualification.	Be sure to provide accurate information. False information may lead to team disqualification.	Be sure to provide accurate information. False information may lead to team disqualification.

Enclose \$100 Entry Fee and mail to:  
 Rocket Basketball Club  
 927 Berenschot Trail  
 Cedar Grove, WI 53013

By signing this registration form you certify that all information submitted herein is accurate and Rocket Basketball acknowledge that Cedar Grove-Belgium High School and or its associates are not responsible for lost or stolen goods or any injury that may occur during the tournament.