2011 ADULT 3-on-3 BASKETBALL ROSTER

Registration Deadline: Tuesday July 26th (Roster has a 4 player minimum)

Dickinson Parks & Recreation
Endless possibilities...

Circle the proper league level at which you feel your team would be competitive. ***MEN'S:*** ***TOP*** ***MIDDLE*** ***BOTTOM***

Sponsor/Team: _____ **Manager:** _____

Phone Number: _____ **Address:** _____

(Cell) (Home) (Work)

Manager's E-mail Address: _____

Did you team play last year? NO_____ YES_____ Team Name:_____

I, and all my executors, administrators hereby waive and release any and all rights and claims against the North Dakota Amateur Basketball organization, Dickinson Parks & Recreation District, West River Community Center, Dickinson Public & Catholic Schools, and all those associated with this program from any liability for injuries which may occur while participating in association and/or league play.

Office Use Only	Player Fee	PLAYER'S NAME (Please Print)	ADDRESS	CITY	PHONE	SIGNATURE	HT.	BIRTH DATE	AGE	T-SHIRT SIZE
	$29	1)								
	$29	2)								
	$29	3)								
	$29	4)								
	$29	5)								
	$29	6)								
	$29	7)								
	$29	8)								

******OFFICE USE ONLY******

SPONSOR FEE: $65	Number of Player Fees Paid @ Registration:	RECEIVED BY: