Warwood School Tri-State Basketball Challenge

TEAM REGISTRATION

Please make copies as needed for each team

Team Name: _____

Coach Name: _____

Number (H) _____ **(C)** _____ **(W)** _____

Age Group:

Boys: 5th _____, 6th_____, 7th _____, 8th _____ Girls 5th _____, 6th _____, 7th _____, 8th _____

Payment Enclosed (Please Circle) Yes No

($150 Checks Made payable to Viking Parents C/O Basketball)

- **All Players on each roster must be enrolled in the given grade in school or may play up one grade higher. 4th graders are permitted as long as the majority of the team is in the grade in which they are registered to play. Any special circumstances will be decided upon by the tournament directors.**
- **No Player will be permitted to play on more than one team for any reason.**
- **No player will be allowed to play without a signed release.**

Name	Grade	Release Enclosed	Jersey Number**

**** Roster must list Jersey Number before first game begins**