GOD'S HOUSE 30N3JAX BASKETBALL TOURNAMENT

Team Registration

Entry fee is \$150/\$50 alternate player. Three (3) players per team required (up to 4 players allowed). This 3-on-3 tournament is a single elimination tournament. Refunds will be given only upon cancellation of the event. Bracket placement will be sent to the team captain via email prior to the preliminaries. If you have any questions, contact us at gods.house.rch.inc@gmail.com and include 3on3Jax in the subject line

Player 1—Captain Age _____ Ht____ Wt ____ Shirt Size _____ City _____ State ____ Zip____ Phone _____Email ____ (Parent or guardian if under age 18) Player 2 Age _____ Ht____ Wt ____ Shirt Size _____ City _____ State ____ Zip____ Phone Email (Parent or guardian if under age 18)

Player 3

Name _				 	
Age	Ht	Wt	Shirt Size		
Address					
City				State	Zip_
Phone _			Email		
(Parent o	or guardian i	if under age 18	5)		
School					
•	: 4 (altern	·			
			Shirt Size		
Address					
City				State	Zip_
Phone _			Email		
			Email		
Signatur	e				

AUTHORIZATION NOTIFICATION:

My initials entered below constitute an electronic signature and confirm that I have completed all sections accurately and truthfully, including information verifying my identity. I understand that the recipient will use the indicated documents(s) for legitimate interests only and that the information contained therein shall not be further transferred or communicated to any other part or agency without my expressed written consent except under authority of the Privacy Act.

I have submitted the required fees along with these documents. I understand that an incomplete form will not be processed and will be considered closed after expiration of the 3-day notification window.

I declare under penalty of perjury that the foregoing is true and correct.

Player 1 _	
Player 2 _	
Player 3	
Player 4	

TEAM NAME