

2011
Holiday Inn



Winter
Shoot Out



ENTRY FORM

TEAM NAME _____

SPONSOR NAME _____

CONTACT PERSON _____ Phone # _____

ADDRESS _____ City _____ Zip _____

COACHES NAME _____ Phone # * _____

ADDRESS _____ Fax # * _____

CITY _____ STATE _____ Zip _____ E-Mail* _____

*If possible we will send tournament bracket information by Phone, Fax or E-Mail. Please circle preference.

My team would like to participate in the following division

BOYS / GIRLS _____ GRADE (5th-8th) _____

Please rank your teams ability 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8 - 9 - 10 _____ Circle one (10 highest)

FEE: \$150.00 on or before November 30 \$165.00 After November 30(postmarked) _____

TOURNAMENT: December 17 & 18

ENTRY DEADLINE: December 5, 2011

PHONE: 307-674-6421

PAYABLE: Sheridan Recreation District _____

_____ P.O. Box 6308

_____ Sheridan, Wyoming 82801

E-MAIL CONTACT nick.dore@sheridanrecreation.com

Forms can be found on our web site at www.sheridanrecreation.com



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Waiver

In consideration of you accepting my child's entry, I hereby, for myself my child my heir, executors and administrators, waiver and release any and all right and claims for damages I or my child may have against the above park district or school district and it's representatives, successors and assigns for any and all injuries suffered by myself for my child at any activity sponsored by these groups.

Team Roster

<u>Players Name</u>	<u>Parents Signature</u>	<u>Phone#</u>	<u>Uniform#</u>	<u>Grade</u>
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				