



TEAM NAME: _____

Team name will be engraved on each name plate if provided. Engravings can include numbers and punctuations. Trophy styles shown may be subject to change due to availability.

TEAM TROPHY FORM

List all players on the team below and mark their trophy choice.



Included Medal
No custom engraving

5" Small
includes engraving

6" Trophy
includes engraving

TROPHY Player's Full Name Required	TROPHY Name to be Engraved (If left blank, Full Name will be used)	Included Medal No custom engraving	Small \$9	Trophy \$13	TOTAL
		BEGINNER SPORTS			
If submitted after Wednesday, January 27 , include \$10 Late Fee					
CONTACT / PAYMENT INFORMATION					
GRAND TOTAL \$					

Full Name _____

Email: _____ Phone: #1 _____

Billing Address: _____ Phone #2 _____

City: _____ State: _____ Zip: _____

VISA | MASTERCARD | DISCOVER Card Number _____ Exp Date ____/____/____

Signature: _____ Date: _____

AZPX-NW

Basketball

Winter 2016

BEGINNER

All orders must be received WITH
PAYMENT no later than 5:00pm on
Wednesday, January 27
 Orders received late must include \$10 late fee.

IMPORTANT

- Use this order form for the entire team.
- NO multiple payments accepted.
- Late orders are subject to availability and style.
- Make checks out to All Year Sports.
- Returned checks subject to \$25 fee.
- Orders NOT accepted without authorizing signature.
- Late fee added to total of entire order.

ADDING PLAYERS

- Print out a blank trophy form.
- Write and circle "ADD-ON" next to the new player.

ORDER SUBMISSION

- **Fax to: 602-445-9366**
All faxes will be received electronically as a secure email. You will not receive a confirmation fax.
- **Email to:** AllYearSports@NYSonline.net
- **Mail to:**
8550 N 91st Avenue #49
Peoria, AZ 85345
- **Drop off** at your local NYS office.
- **NO Phone orders.**
- **Taking a photo of your trophy form via cell phone is not an accepted format for submission.**

PHOTO / TROPHY PICKUP

Choose one team representative to pickup photos and trophies for the whole team.

Thursday, February 18

4:00 to 6:30 PM

Peter Piper Pizza

6821 W. Peoria Avenue #149 | Phoenix

OFFICE USE

Cash \$ _____ Check# _____

CC Auth# _____ Date Ran: _____

Received by: _____ Date: _____

Entered by: _____ Date: _____

Accounting _____ Date: _____