All Under One Roof – Pacific AAU
Tournament Entry Form

OFFICIAL TEAM ROSTER & ENTRY FORM

One form per team – Must be turned in at registration COMPLETLEY FILLED OUT

TEAM NAME: _____ **CLUB #:**_____ **AGE GROUP:** _____

TOURNAMENT NAME:_____**DATE:**_____ **GIRLS:** ☐ **BOYS:** ☐ **OPEN:** ☐ **CLUB:** ☐

JERSEY # White/Dark	PRINT NAME First Last	AAU MEMBERSHIP # s	AGE	GRADE

LIST THE (3) NON-PLAYERS THAT ARE ALLOWED ON BENCH*:

HEAD COACH:_____ **MEMBERSHIP #**_____

Assistant Coach_____ **MEMBERSHIP #**_____

Assistant Coach_____ **MEMBERSHIP #**_____

*Must List at least 2 no more than 3 Adult (18 or Over) Coaches per Team. In signing this document, I verify that as an coach/team manager, I am a registered AAU amateur coach/team manager, according to the AAU code, and that in consideration of your accepting my entry, I, intending to be legally bound, and my heirs and administrators hereby waive and release any and all claims and rights that I may have against the Amateur Athletic Union, the tournament organization, the owner/lessor/operators of the facilities, and their representatives for any and all injuries or losses suffered by me at said tournament. Held under the Sanction of the Pacific District of the Amateur Athletic Union of the United States

Team Coaches must have current AAU cards and birth records for each player.

I certify that the above information is correct:_____ _____
Signature of Head Coach or Team Manager

CONTACT INFORMATION - NAME:_____

ADDRESS:_____ POSITIVE PLACE_____ CITY:_____MARSHALL____ STATE:TX___ZIP:_____

PHONE (H):_____ (W):_____ (C):_____

EMAIL:_____

Please print clearly, this information is important, all parts must be filled out or your entry will be rejected.