Massachusetts Senior Games

2014 BASKETBALL TOURNAMENT TEAM ROSTER

Team Name: _____ Representing State of: _____

Captain/Coach Name: _____ Team: ☐ Male ☐ Female

Age Group: ☐ 40+ ☐ 45+ ☐ 50+ ☐ 55+ ☐ 60+ ☐ 65+ ☐ 70+ ☐ 75+ ☐ 80+

Address: _____ Coach Email: _____

City: _____ ST: _____ Zip: _____

Tel: (home) _____ Tel: (work) _____ Tel: (cell) _____

Team rosters shall be limited to ten persons, including non-playing coaches, non-playing captains and non-playing bench personnel

PLEASE PRINT CLEARLY

Player age as of 12/31. A player may play on a younger team but may not play on an older team.

PLAYER NAME	#	CITY, STATE	AGE	DATE OF BIRTH

Rosters will be returned to captain if not filled out clearly and correctly

By MAY 31, 2014, must return registration form and entry fee of $150.00, payable to:

Massachusetts Senior Games, 56 Riverview Street, Springfield, MA 01108