

**Friday Night Hoops @ ACCHS
Boys 3-on-3 Basketball Tournament
Grades 5-8
Friday, Feb. 26, 2010, 5-9pm**



Program Specifics:

- Two game guarantee -- many will play three
- Each team member receives an official ACC Basketball t-shirt
- Brackets available for all grade levels, 5, 6, 7, & 8. Players may not play down.
- Cost is \$55 per team - First 8 team entries received in each grade bracket play.
- Spectator admission only \$2
- All proceeds will benefit ACC Athletic Programs
- All games officiated
- Coaches will receive specific tournament information & rules via e-mail prior to start of event.



Friday Night Hoops @ ACCHS, Boys 3-on-3 Basketball Registration Form

First Come, First Serve Registration -- Entry Deadline is 3pm, Monday, February 22, 2010*

Please fill out one registration form/permission slip per child.

Make checks payable to Aurora Central Catholic H.S.

PLEASE PRINT * Or until full. Late Registration Fee of \$10 Applies

Coach's Name: _____ Phone: _____

E-Mail (Please Print) _____

Player #1 _____ Grade _____ T-Shirt Size YM YL AS AM AL XI

Player #2 _____ Grade _____ T-Shirt Size YM YL AS AM AL XI

Player #3 _____ Grade _____ T-Shirt Size YM YL AS AM AL XI

Player #4 _____ Grade _____ T-Shirt Size YM YL AS AM AL XI

Notes: All players MUST have their parents sign a copy of the Hold Harmless Statement Below.
All teams MUST have an adult to serve as a coach.

Statement of Hold Harmless I, _____ (printed name of parent), hereby give my permission for my child _____ (printed name of child) to participate in this ACCHS Youth Activity Program and I agree not to make any claim, suit, or demand against Aurora Central Catholic High School for any injury or damage incurred on account of such participation. I further agree to indemnify and hold Aurora Central Catholic High School, the Diocese of Rockford (Illinois) and employees/students of Aurora Central Catholic High School harmless from any and all claims, actions, or liabilities, resulting from participation of my child in the aforementioned youth program.

Parent Signature: _____ Date: _____

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