



3 on 3 SUMMER TOURNAMENT 2010

Sundays July 26th and August 1st

\$50/Team

A maximum of 5 players per team. Round robin format, games first to 15 points or 20 minutes maximum game time. Teams with the best record will advance to championship finals at the end of the day

Sunday July 26, 2010 Sunday August 1, 2010

10 & Under 12 & Under 14 & Under 16 & Under Open

Male Female TEAM NAME _____

Each team member must fill out their own registration form AND be submitted as a team

Name _____ Last Name _____ Male Female

Address _____ City _____

Postal code _____ Date of Birth ____/____/____ (DD/MM/YYYY)

Mother's Name _____ Father's Name _____

Home Phone # _____ Cell Phone _____

E-mail Address _____ Health Card Number _____

(please print all communicate thru email)

(optional)

Medications _____ Allergies _____

Previous Basketball Experience _____

Where did you hear about our programs? _____

Additional information _____

I, the undersigned, hereby certify that I am the parent/guardian of _____ who is under 18 years of age. I hereby acknowledge that there is a risk of injury in any sporting activity and hereby agree that, The Oakville Basketball Club Inc, their coaches, and executives shall not be liable for any injury, loss or damage to person or property resulting from participation in an Oakville Basketball Club program. If at any time emergency medical treatment is necessary for my child; I consent for treatment to be given.

Parent's Name: _____ Signature: _____

☺ Mail form with cheque payable to: Oakville Basketball Club Inc.
2009 Wycroft Road, Unit B
Oakville, Ontario L6L 6J4

NO REFUNDS AFTER PROGRAM START DATE

Withdrawal prior to the first session is subject to a \$25 administration fee. Please allow up to 4 weeks to process.

www.oakvillebasketball.com 905-469-1855 or 1-866-HOOPS-54

Office Use Only PMT _____ CN _____ CA _____ NOC _____
