



AGAME SUPERSHOOTOUT

MARCH 24TH & 25TH

BOYS AGE BASED: 8U / 9U / 10U / 11U / 12U / 13U / 14U / 15U / 16U / 17U

BOYS GRADE BASED: 8TH / 7TH / 6TH / 5TH
(circle)

Team Name: _____

Amount of Teams: _____ Rate Included: \$ _____

Gender: _____

Division Preference (circle):

--GRADE BASED DIVISION

--AGE BASED DIVISION A

--AGE BASED DIVISION B

(NOTE: Only 2 Coaches Permitted on Bench / If entering more than 1 team each team must have a separate coach)

Head Coach: _____

Cell-Phone: _____

Address: _____

City / State / Zip: _____

Team Mom: _____

E-Mail: _____

Team Mom Cell: _____

Asst. Coach: _____

Cell-Phone: _____

Address: _____

City / State / Zip: _____

E-Mail: _____

Payment – MUST accompany entry for team(s) to be accepted.

Check Enclosed

Request PayPal Payment Link

Send Entry Payable To:

AGame / Hines Promotions

Attn: Carl Hines

2337 Philmont Ave. Suite 104A

Huntingdon Valley, PA 19006

Phone: 267.257.4360

carlhines@agamesupershootout.com

TEAM WAIVER FOR PARTICIPANTS

In consideration for our team's entry into the above tournament, I hereby waive and release any and all rights and claims for damages I may have against AGame, and its representatives, successors and assigns any and all injuries suffered by us in any activities sponsored by these groups and understand that the team is solely responsible for payment of any such medical expenses. AGame carries standard liability insurance for the entire event and all participants.

Each team may have no more than 12 participants and must play only for the team entered on the roster.. Each team should have 1-2 coaches per team. **No coach may coach 2 or more teams without a second coach on site.**

Please sign below and send your entry fee to the name and address listed below.

COACH'S SIGNATURE

DATE