



# 3-on-3 Basketball Tournament

*Sponsored by SENATOR JACK MARTINS*



**SATURDAY JULY 16, 2011**  
 Tip-off at 10:30 am SHARP  
 Dutch Broadway School  
 Assemblyman Tom Alfano Basketball Courts  
 1880 Dutch Broadway  
 Elmont, New York 11003

SOCCKER GAMES GOING ON, 7 on 7 Football Games at 5pm (New York vs Florida)

Day of registration deadline half hour before your division tip-off

Team Registration Form: Elmont, North Valley Stream, Franklin Square, Floral Park, Bellerose Terrace, Bellerose Village, South Floral Park, New Hyde Park, Garden City, Stewart Manor.

**Tournament Team Name:** \_\_\_\_\_ (please print)

	<u>BOYS</u>	<u>GIRLS</u>	<u>Tip-Off Time</u>
<b>Division:</b>	<input type="checkbox"/> 5 <sup>th</sup> & 6 <sup>th</sup> Grade Boys	<input type="checkbox"/> 5 <sup>th</sup> & 6 <sup>th</sup> Grade Girls	<b>10:30 am</b>
<b>(check one)</b>	<input type="checkbox"/> 7 <sup>th</sup> & 8 <sup>th</sup> Grade Boys	<input type="checkbox"/> 7 <sup>th</sup> & 8 <sup>th</sup> Grade Girls	<b>12:30 pm</b>
	<input type="checkbox"/> 9 <sup>th</sup> & 10 <sup>th</sup> Grade Boys	<input type="checkbox"/> 9 <sup>th</sup> & 10 <sup>th</sup> Grade Girls	<b>2:30 pm</b>
	<input type="checkbox"/> 11 <sup>th</sup> & 12 <sup>th</sup> Grade Boys	<input type="checkbox"/> 11 <sup>th</sup> & 12 <sup>th</sup> Grade Girls	<b>4:30 pm</b>
	<input type="checkbox"/> College Level	<input type="checkbox"/> College Level	<b>5:30 pm</b>

### PLAYER 1 - Captain

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ Grade: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Parent/Guardian Signature Required (Permission and understanding of Release/Waiver \*):

Name: \_\_\_\_\_  
 Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### PLAYER 2

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ Grade: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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**Parent/Guardian Signature Required** (permission and understanding of Release/Waiver \*):

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**PLAYER 3**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Grade: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Parent/Guardian Signature Required** (permission and understanding of Release/Waiver\*):

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Player 4 (optional)**

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Grade: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Parent/Guardian Signature Required** (permission and understanding of Release/Waiver \*):

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**\*Sportsmanship Pledge: I realize that I am responsible for my personal conduct and the conduct of my teammates** throughout the duration of this tournament, both on and off the court. I vow to represent myself and my team in a sportsmanlike manner and to treat teammates, opponents, spectators, and volunteers with respect.

**\*Release/Waiver:** I acknowledge that my child will be participating in the 3-on-3 Basketball Tournament on Saturday, July 16, 2011. I understand that this activity may require physical conditioning and/or skill, and I certify that my child is physically capable of participating in this activity. I also understand that there may be risks associated with this activity and I agree to follow all applicable instructions, rules and regulations during the course of my child's participation. I agree to release the Elmont Union Free School District, Board of Education, Superintendent of Schools, Dutch Broadway School and all other tournament hosts, organizers, and volunteers from responsibility for any injuries that my child may sustain while engaged in this activity. I hereby grant full permission to use any photographs, videotapes, or recordings of my child's likeness from this event for any purpose without reimbursement of any kind.

**Please return completed registration form to:**

**3-on-3 Basketball Tournament**

**567 Oakley Avenue**

**Elmont, New York 11003**

**Or e-mail:**

**scottcushing1@gmail.com**