



## 3<sup>rd</sup> Annual Basketball Tournament Registration Form 2012

**Cost:** \$60 per team for tournament; \$5/person for 3-Point Shot Contest

**Registration deadline is Friday, January 27<sup>th</sup>**

**Team Name:** \_\_\_\_\_

**Player #1 Name: (Team Captain)** \_\_\_\_\_

Company: \_\_\_\_\_ **Shirt Size:** M L XL XXL

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

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Yes, I want to participate in the 3-Point Shot Contest (\$5/person)

**Player #2 Name:** \_\_\_\_\_

Company: \_\_\_\_\_ **Shirt Size:** M L XL XXL

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

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Yes, I want to participate in the 3-Point Shot Contest (\$5/person)

**Player #3 Name:** \_\_\_\_\_

Company: \_\_\_\_\_ **Shirt Size:** M L XL XXL

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

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Yes, I want to participate in the 3-Point Shot Contest (\$5/person)

**Optional Player #4 Name:** \_\_\_\_\_

Company: \_\_\_\_\_ **Shirt Size:** M L XL XXL

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

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

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Yes, I want to participate in the 3-Point Shot Contest (\$5/person)

**Please mail this form along with your registration payment\* to:**

Sober Corps  
905 4<sup>th</sup> Avenue South  
Minneapolis, MN 55404

**\*Checks can be made payable to "Sober Corps"**