April Boys' Basketball Tournament

Entry Form
Frank Gilchrist Youth Tournament
Bismarck State College
April 17-18, 2010

Sponsors Name_____

Team Name_____

Day Time Contact: Name_____Day Time Telephone_____

Address:_____City/State/Zip:_____

Grade (circle one) 4 5 6 7 8

REGISTRATION & REFUND DEADLINE: THURSDAY, APRIL 8, 2010
ENTRY FEE: $125.00 (Make check payable to Bismarck State College)

By signing below I hereby acknowledge the health of my son to be ready for vigorous activity at the BSC Mystic Athletic Club Tournament and authorize the directors to secure any emergency treatment deemed necessary and that I hereby release tournament directors, coaches, BSC and all employees from all such claims on account of any injuries which may be sustained by my son while attending the tournament. I also understand that BSC and the tournament staff are not responsible for any medical expenses or bills incurred by my son while attending the tournament.

(Please Print Legibly In Numerical Order By Uniform Number)

Uniform #	Name	Grade	Telephone #	Parent Signature

Please make sure that each parent/guardian has signed the roster/release form. **Entry form will not be accepted if incomplete.**

Mail Check and Roster to: Mystic Athletic Club
Bismarck State College
P. O. Box 5587
Bismarck, ND 58506-5587

Questions? (701) 224-5480

Brackets will not be mailed. They will be available online by the Tuesday preceding the tournament at www.bismarckstate.edu/sports (click on youth tournaments). No refunds will be made if notified after the registration deadline listed above.