

**AMATEUR ATHLETIC UNION
Pacific District Tournament Series
Tournament Entry Form -**

OFFICIAL TEAM ROSTER & ENTRY FORM
One form per team

TEAM NAME: _____ **CLUB #:** _____ **Grade Level:** _____
TOURNAMENT NAME: _____ **DATE:** _____ **GIRLS:** • **BOYS:** • **LEVEL I:** • **II:** •

JERSEY # White/Dark	TYPE NAME NAME (LAST, FIRST)	AAU MEMBERSHIP #	AGE/GRADE
1 ___/___			
2 ___/___			
3 ___/___			
4 ___/___			
5 ___/___			
6 ___/___			
7 ___/___			
8 ___/___			
9 ___/___			
10 ___/___			
11 ___/___			
12 ___/___			
13 ___/___			
14 ___/___			
15 ___/___			

LIST THE (3) NON-PLAYERS THAT ARE ALLOWED ON BENCH*:

HEAD COACH: _____ **MEMBERSHIP**
Assistant Coach _____ **MEMBERSHIP**
Assistant Coach _____ **MEMBERSHIP**



*Must List at least 2 no more than 3 Adult (18 or Over) Coaches per
I am a registered AAU amateur
coach/team manager, according to the AAU code, and that in
bound, and my heirs and administrators
hereby waive and release any and all claims and rights that I may have against the Amateur Athletic Union, the tournament organization, the owner/lessor/operators of
the
facilities, and their representatives for any and all injuries or losses suffered by me at said tournament. Held under the Sanction of the Pacific District of the Amateur
Athletic
Union of the United States

Team. In signing this document, I verify that as an coach/team manager,
consideration of your accepting my entry, I, intending to be legally

Team Coaches must have current AAU cards and birth records for each player.

I certify that the above information is correct:

Signature of Head Coach or Team Manager

CONTACT INFORMATION - NAME: _____

ADDRESS: _____ **CITY:** _____ **STATE:** _____ **ZIP:** _____

PHONE (H): _____ **(W):** _____ **(C):** _____

EMAIL: _____

Please print clearly, this information is important, all parts must be filled out or your entry will be rejected.