

AMATEUR ATHLETIC UNION
OFFICIAL TEAM ROSTER & ENTRY FORM
One form per team

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

TEAM NAME: _____ **CLUB #:** _____ **AGE GROUP:** _____

TOURNAMENT NAME: _____ **DATE:** _____ /2010___ **LEVEL 1:** **2 :**

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

LIST THE (2) NON-PLAYERS THAT ARE ALLOWED ON BENCH*:

HEAD COACH:		MEMBERSHIP #
Asst. COACH:		MEMBERSHIP #

*Must List at least 2 no more than 3 Adult (18 or Over) Coaches per Team. In signing this document, I verify that as an coach/team manager, I am a registered AAU amateur coach/team manager, according to the AAU code, and that in consideration of your accepting my entry, I, intending to be legally 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 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 NAME: _____

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

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

EMAIL: _____