



21st Annual "THS/DHS" Basketball Tournament

Sat. & Sun., Jan. 13 & 14, 2018



Note: Teams will play both days!

DICKINSON PARKS & RECREATION

Phone: (701) 456-2074

Fax: (701) 456-2073

Email: wmclaughlin@dickinsonparks.org

Web: www.dickinsonparks.org

ENTRY FEE: \$150 (3-Game Guarantee)

Payable to: DPRD / 2004 Fairway St / Dickinson, ND 58601

DEADLINE: Tuesday, January 2, 2018

Tournament Brackets Will Be Posted On Our Website!

TEAM NAME (as listed on brackets): _____

CITY: _____

Coaches (2 allowed): 1) _____

2) _____

NOTE: Participants in Grades 7-8 ARE NOT ELIGIBLE to play if they are participating in their school program & their school season practice has started! (This does not apply to Grades 3-6)

GRADE (check one): Boys: 3 ___ 4 ___ 5 ___ 6 ___ Girls: 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___

TEAM CLASSIFICATION: Teams will be placed in separate divisions dependant upon the number of team entries, as well as team ranking in comparison with other teams in the same grade.

Team ranking is based on the COACHES' JUDGEMENT: BE HONEST – DON'T SANDBAG!!!

TEAM RANK (check one): (Best) 8 ___ 7 ___ 6 ___ 5 ___ 4 ___ 3 ___ 2 ___ 1 ___ (Lowest)

TEAM CONTACT PERSON

NAME: _____

MAILING ADDRESS: _____ City: _____ State: _____ Zip: _____

E-MAIL ADDRESS: _____

PHONE: Cell _____ Alt. _____

Please have all parents/guardians sign the roster which acts as the player liability release.

As a parent/guardian of a participating child, by my signature I hereby give my permission for him/her to participate in this tournament and do release Dickinson Parks & Recreation, Dickinson State University, Dickinson Public Schools, Dickinson Catholic Schools, City of Dickinson, and all those associated with this event from any liability for injuries which may occur to the said child while participating in this event.

PLEASE PRINT ALL NAMES LEGIBLY!!!

PLAYER'S NAME (First & Last)	Gr.	PARENT SIGNATURE	PHONE
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			
11)			
12)			