

# 2024 Adult Men's 3-on-3 Basketball Roster

**Registration Deadline: Wednesday Aug. 28, 2024 (Roster has a 4 player minimum)**

All sponsor & player fees must be paid in full when team registration is submitted to DPR or it will not be accepted! It is the Team Manager's responsibility to collect all fees ahead of time and submit them as one team registration. Do not tell players to stop at DPR to pay.

Circle the proper league level at which you feel your team would be competitive.	Top	Middle	Bottom
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Team Name: \_\_\_\_\_

Manager: \_\_\_\_\_ Phone: \_\_\_\_\_ (cell) \_\_\_\_\_ (alt.)

E-mail Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ (city) \_\_\_\_\_ (state) \_\_\_\_\_ (zip)

Did your team play last year? YES _____ NO _____	Team Name: _____
<b>Is this team: Better Same Worse than last year?</b>	

I, and all my executors, administrators hereby waive and release any and all rights and claims against the Dickinson Parks & Recreation District, West River Community Center, Dickinson Public & Catholic Schools, and all those associated with this program from any liability for injuries which may occur while participating in association and/or league play.

Office Use Only	Player Fee	Player's Name (Please Print)	Address	City	Phone	Signature	HT.	Age	T-Shirt Size
	\$42	1)							
	\$42	2)							
	\$42	3)							
	\$42	4)							
	\$42	5)							
	\$42	6)							
	\$42	7)							
	\$42	8)							
	\$115	<b>Total Fees Paid @ Registration:</b>				<b>Packet Received By (DPRD Employee Initials)</b>			
<b>Notes:</b>									