

## MARCH 15-16, 2024 LIVONIA, MICHIGAN

## ENTRY FORM



Team Name:			City:		State:		
			O Women's (3 x 3 on court) O Men's Over 50 (3 x 3 on court)  Max 4 players on a team Must be over age 50				
Each player may sign only one roon on the one of the on							
# PRINT PLAYER'S FULL NAME	ADDRESS - NUMBER, STREET	, CITY, STATE, ZIP	PHONE #	E-MAIL	ADDRESS	SOCIETY	ROSTER
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12.	mount he maid writer to the tourne	ment Fees are non	refundable Make abov	alcharable to DDC	IIA Daakathall ar ua	a the enline ne	meant antiar
Entry fee is \$100 per team. Entry fees at <a href="https://www.prcua.org/payonline">www.prcua.org/payonline</a> , indicating y Ave., Chicago, IL 60642-4101 or <a href="mailto:frate">frate</a>	you are paying for: "Basketball Tolernal-department@prcua.org.	urnament - (TEAM N	AME)". Send application	and fee to: PRCI	JA Basketball Tour	nament, 984 N	. Milwaukee
As manager or coach of the above tear player's information has been falsified					he above information	on. I understan	d that if any
Captain/Coach:	Address:		City:		_ State: Ph	one:	

Entries must be received no later than Friday, February 16, 2024.