



Noél Monique Shorten & Jason Tyrell Stewart Memorial Scholarship 3-on-3 Basketball Tournament



Registration Form

Team Information

Name: _____	Age / Division _____	# of players _____
Coach/Contact: _____	Cell Phone: _____	Home Phone: _____
Address: _____	City _____	State: _____ Zip _____
Email _____		

Player 1 Name: _____ **Age/Birthday** _____
 Address: _____ City _____
 Phone: _____ Cell Phone _____
 Parent/Guardian Name _____ Home Phone _____
 Email _____ Cell Phone _____

Player 2 Name: _____ **Age/Birthday** _____
 Address: _____ City _____
 Phone: _____ Cell Phone _____
 Parent/Guardian Name _____ Home Phone _____
 Email _____ Cell Phone _____

Player 3 Name: _____ **Age/Birthday** _____
 Address: _____ City _____
 Phone: _____ Cell Phone _____
 Parent/Guardian Name _____ Home Phone _____
 Email _____ Cell Phone _____

Player 4 Name: _____ **Age/Birthday** _____
 Address: _____ City _____
 Phone: _____ Cell Phone _____
 Parent/Guardian Name _____ Home Phone _____
 Email _____ Cell Phone _____

Player 5 Name: _____ **Age/Birthday** _____
 Address: _____ City _____
 Phone: _____ Cell Phone _____
 Parent/Guardian Name _____ Home Phone _____
 Email _____ Cell Phone _____

_____ 9-10 - \$50.00 per team _____ 14-17 - \$75.00 per team
 _____ 11-13 - \$50.00 per team _____ 18-UP - \$100.00 per team

Please complete form and return with entry fee by mail to:

NMS & J2 Memorial Scholarship
P. O. Box 6886
Huntsville, Texas 77342

\$10.00 Discount and Free Wristband
Early Registration: Saturday, October 13, 2012

FINAL REGISTRATION DEADLINE: Friday, October 26, 2012

General Information

- Double Elimination
- This tournament is open to ages 10-17 (proof of age required—parent/legal guardian permission) and 18 and up
- Teams may have 5 players man team 3 on 3.
- Players may only play on one team.
- Entry Fees are non-refundable.
- Registration form must be filled in completely, including parent’s signature.
- Trophy and certificates will be awarded.
- Registration forms are available on–line at **NMSJ2.com**

Parent Acknowledge

Release/waiver: The UNDERSIGNED is aware that there are risks associated with this activity. The UNDERSIGNED hereby releases and waiver the NMS & J 2 Memorial Scholarship and all other tournament hosts, organizers and volunteers from any and all personal or property liability. The UNDERSIGNED hereby grants permission to allow photographs and video recordings to be taken during the event. **(Must be signed by parent if under 18).**

I hereby give my permission to participate and be involved in the NMS & J2 Memorial Scholarship 3 on 3 Basketball Tournament.

_____ Player 1--Signature of participant Or Parent /Legal Guardian	_____ Date
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Medical Waiver and Release of Liability (This form must be signed by the parent/guardian of each player before player is eligible to participate in tournament) I, the above signed, hereby authorize any first aid, medication, medical treatment or surgery deemed necessary in case of an emergency for the above player **NMS & J2 Memorial Scholarship** tournament play. I, the above signed, in consideration of the players participation in **NMS & J2 Memorial Scholarship** tournament, intending to be legally bound, do hereby ourselves, executors, and administrators waive, release, and forever discharge any and all rights and claims for damages, including any claims for loss, damages or injury to our persons or property arising out of the above player’s performance or failure of performance from the **NMS & J2 Memorial Scholarship**, their agents, representatives, successors and assigns.

All Proceeds will benefit the NMS & J2 Memorial Scholarship Fund