



6th Annual Brevard Bulls Spring Classic

March 19th - 21st 2010

Melbourne, FL

Team Name _____	Address _____
Registration # _____	Address _____
Coach _____	City _____ Zip _____
Home Phone _____	Cell Phone _____
Work Phone _____	Email _____

Please circle one: Division I

Please circle one: Boys

Please circle the grade level that your team is entering

5 th Grade	6 th Grade
7 th Grade	8 th Grade
9 th Grade	10 th Grade
11 th Grade	12 th Grade

Note: Divisions may be combined if there are not a minimum of 4 teams per division or grade.

3 Game Guarantee

For additional information please feel free to contact us:

Brevard Bulls
P.O. Box 61195
Palm Bay, FL 32906
321-446-2556

brevardbulls@vzw.blackberry.net

Make checks payable to:
Brevard Bulls

Mail Entries to:
Brevard Bulls
P.O. Box 61195
Palm Bay, FL 32906

This form must be completed and returned by:
March 9th 2010

\$325 Entry fee is required with the mailing of this form

Check Money Order

The tournament schedule will be available on our webpage @ www.flahoops.org



Florida State Office
(813) 991-6445
contact_us@flahoops.org