



# Brevard March Madness

March 26<sup>th</sup> - 28<sup>th</sup> 2010

Melbourne, FL

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

Please circle one:	Division I
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Please circle one:	Girls
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Please circle the grade level that your team is entering	
3 <sup>rd</sup> Grade	4 <sup>th</sup> Grade
5 <sup>th</sup> Grade	6 <sup>th</sup> Grade
7 <sup>th</sup> Grade	8 <sup>th</sup> Grade
9 <sup>th</sup> Grade	10 <sup>th</sup> Grade
11 <sup>th</sup> Grade	12 <sup>th</sup> 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  
 PO Box 61195  
 Palm Bay, FL 32906  
 (321) 446-2556

[brevardbulls@vzw.blackberry.net](mailto:brevardbulls@vzw.blackberry.net)

This form must be completed and returned by:

### March 16<sup>th</sup> 2010

Make checks payable to:  
Brevard Bulls Basketball Organization

Mail Entries to:  
Brevard Bulls Basketball Organization  
PO Box 61195  
Palm Bay, FL 32906

\$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](http://www.flahoops.org)



Florida State office  
 (813) 991-6445  
[contact\\_us@flahoops.org](mailto:contact_us@flahoops.org)