



Memorial Day Weekend Qualifier

May 28th – 30th 2010

Port St. Lucie, FL

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

Please circle one: Division II

Please circle one: Girls Boys

Please circle the grade level that your team is entering

3 rd Grade	4 th Grade	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:

Steve Ripley
 4828 N Kings Hwy
 #110
 Ft Pierce, FL 34951

steveripleyfl@aol.com

This form must be completed and returned by:

May 18th 2010

Make checks payable to:

Treasure Coast Basketball Club

Mail Entries to:

Treasure Coast Basketball
 4828 N Kings Hwy
 #110
 Ft Pierce, FL 34951

\$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