

**ENTRY FORM  
14<sup>TH</sup> ANNUAL 3on3 HOOPFEST  
DICKINSON, ND  
May 3 & 4, 2008**

Sponsor Name \_\_\_\_\_

Team Name \_\_\_\_\_

Email Address \_\_\_\_\_  
(Brackets will be posted at [www.dickinsonchamber.org](http://www.dickinsonchamber.org) by noon on Wednesday, April 30, 2008)

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Coach's Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

*(Print clearly please)*

Circle the most suitable category for your team (**High School divisions will be played on Sunday ONLY**):

**Boys** Grade: 4<sup>th</sup>    5<sup>th</sup>    6<sup>th</sup>    7<sup>th</sup>    8<sup>th</sup>    9<sup>th</sup>    10<sup>th</sup>    11<sup>th</sup>    12<sup>th</sup>  
**Girls** Grade:        4<sup>th</sup>    5<sup>th</sup>    6<sup>th</sup>    7<sup>th</sup>    8<sup>th</sup>    9<sup>th</sup>    10<sup>th</sup>    11<sup>th</sup>    12<sup>th</sup>  
**Adult Men**            **Adult Women** **Old Pro** **Adult Men**            **Old Pro** **Adult Women**  
**Please rate your team (beginner) 1    2    3    4    5    6    7    8    9 (advanced)**  
**(NOTE: Tournament officials have the right to combine divisions if necessary)**

By my signature, I hereby give my permission for my child or myself to participate in the 14<sup>th</sup> Annual 3on3 Hoopfest and to release the Dickinson Area Chamber of Commerce, Dickinson High School, Hagen Jr. High, Berg Elementary, and all those associated with this event from any liability for injuries which may occur to the said child or adult while participating in this event.

**ROSTER  
UP TO 4 MEMBERS PER TEAM ONLY**

**All participants must sign, those under 18 need a parent/guardian's signature.**

Name	Parent's/Adult Player Signature	Phone	Grade

**TO ENTER:** Please make sure that all parents/guardians and adult participants have signed the roster which acts as the player liability release. **Mail this roster along with your \$75 entry fee, made payable to 3on3 Hoopfest to: 3on3 Hoopfest, P.O. Box C, Dickinson, ND 58602. Registration deadline is April 22, 2008.** Absolutely no refunds will be made after deadline date.

The Dickinson Area Chamber of Commerce must be given the name and phone number of the responsible adult for each team if different from information below.

Adult Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**ENTRY FORMS RECEIVED WITHOUT REGISTRATION FEE WILL NOT BE ACCEPTED!**