



TUNE UP TEAM ROSTER

TEAM: _____

BOYS (circle one): 2nd/8u, 3rd/9u, 4th/10u, 5th/11u, 6th/12u, 7th/13u, 8th/14u, 15u, 16u, 17u

COACH: _____

GIRLS (circle one): 2nd/8u, 3rd/9u, 4th/10u, 5th/11u, 6th/12u, 7th/13u, 8th/14u, 15u, 16u, 17u

PHONE: _____ EMAIL: _____

COACH: _____

PHONE: _____ EMAIL: _____

	PLAYER #	SHIRT SIZE	NAME OF PLAYER	BIRTHDATE	GRADE	PARENT(S) SIGNATURE	PLAYER'S SIGNATURE
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							

I, the team coach, declare that the birthdates on this roster are correct. I hereby certify that the members of the team names above meet the age requirements stipulated by PTBA Basketball and that each of the above-named players is covered by a proper accident policy of insurance. In consideration of your accepting this Team Roster, I hereby, for myself, my team, heirs' executors, administrators and assignees, waive and release all rights and claims for damages that I may have against PTBA Basketball for any injury or damages incurred at said tournament, I understand that unsportsmanlike conduct will not be tolerated and could result in my team's dismissal from the tournament without refund. All athletes and coaches must be listed on this Team Roster before participation in this tournament.

Date _____

Print Name of Coach _____

Signature _____