



**THE 5th ANNUAL “MEMORIAL” COURTNEY S. CROOMS
GIRLS BASKETBALL TOURNAMENT FUNDRAISER
May 18th – 22th, 2012**

Location(s): Carl Rhodenizer Rec Center, 3499 Rex Road, Rex Ga. 30273
Virginia Burton Gray Rec Center, 1475 East Fayetteville Rd. Riverdale Ga. 30274

Team Entry Fee: Only \$260. 1st Place Teams in each age group \$1,000/2nd Place Teams \$500

Age Groups: 13u; 14u; 15u; and 16u-18u (This is an “AGE-BASED” Event!)

ELIGIBLE TEAMS: Girls AAU, YBOA, High Schools, and Recreation League

Please direct questions to: Meshal Crooms @ 404.293.4517

Mail this ENTRY FORM **with your \$260** registration fee to:

**The Courtney S. Crooms Foundation
P.O. Box 697
Lovejoy, Ga. 30250**

**-Cancel/Withdraw refunds thru May 1st, 2012
(minus \$50 processing fee)
-Absolutely no refunds after May 1st, 2012**

Also, **PLEASE FAX** a copy of the completed ENTRY FORM to: **404.996.1174**

Please make checks/MO payable to The Courtney S. Crooms Foundation. *This tournament is NOT sanctioned by the AAU or YBOA organizations.*

Team Name _____

Age Group (check one) 13u 14u 15u 16u-18u (**Age verification is required. See Website for forms**)

Name of Head Coach _____ Phone:# _____

Email: _____

Assistant Coach/Team Mom _____ Phone# _____

Email: _____

By my signature as team administrator/POC (Point of Contact) I hereby waive The CSC Foundation Inc., its officers and volunteers, Carl Rhodenizer Recreation Center, Virginia Burton Gray Recreation Center and/or any facility which serves as a host venue for this tournament of liability for accident and injury. I give consent for members of my team to obtain emergency first aid if necessary and I understand that each player must be covered by medical insurance. I also understand that individual parental consent forms for **each player** on my roster **must be** signed by a parent or guardian and submitted prior to participation in this event.

Team administrator/POC Signature

Date