

M YMCA of Northern Michigan 3-on-3 Youth Basketball C Tournament Registration April 15, 2023

Registration opens: 2/13/23 | Registration Closes: 4/7/23

Team Name: _____

Return completed form along with check, cash or Credit Card Information for the \$105 Team Fee to: YMCA of Northern MI, 523 W. Jefferson St. Petoskey, MI 49770 or email to samantha@gtbayymca.org.

Team forms submitted after 4/7 will not be processed.

Girls Team	Boys Team	_ Co-Ed Team				
Division by GRADE:	(based on the o	oldest player)	3-4	5-6	7-8	9-10
Team Contact I	nformation					
Coach Name: Coach Address: Coach Email:_ Coach Phone (1):_ Coach Phone (2):					 	
Player Informat	ion					
Player #1		Playe	r #2			
Name:		Name:	:			
Email:		Email:				
Grade		Grade				
Shirt Size: YthM YthLG	Adult SM M LG XL	Shirt S	Size: YthM	YthLG Adul	tSM M L	_G XL
Player #3		Playe	r #4			
Name:		Name:	i			
Email:		Email:				
Grade		Grade				
Shirt Size: YthM YthLG A	Adult SM M LG XL	Shirt S	Size: YthM	YthLG Adul	tSM M L	.G XL

Participation Waiver

Release/waiver: The UNDERSIGNED is aware that there are risks associated with this activity. The UNDERSIGNED hereby releases and waives the YMCA of Northern Michigan and all other tournament hosts, organizers and volunteers from any and all personal or property liability. The UNDERSIGNED agrees to adhere to all rules, policies and judgments that are associated with participation in this event. The UNDERSIGNED hereby grants permission to allow photographs and video recordings to be taken during the event. (Must be signed by parent/guardian if under 18).

Player #1	
,	Parent/guardian
Player #2	
,	Parent/guardian
Player #3	
,	Parent/guardian
Player #4	
•	Parent/guardian

Payment Information

Select one of the options below and please note that the total registration fee is required before your team will be officially registered for the tournament. If you would like to make cash payments, please register and pay for your team at our office.

I've included the full payment via check #	
I would like you to process my credit/debit card information upon reof this registration form for the team payment:	eceipt
Name on Card:	
Billing Address:	
Visa/Master Card/Discover #	
Exp:/ CVV Transaction Total: \$	

By checking the option to charge the card listed above, I authorize the YMCA of Northern Michigan to access my Visa, Master or Discover Card for the tournament fee. When my issuing bank authorizes this transaction by charging the designated account, such an authorization will serve as a receipt for the program payment. I understand that the payment will be electronically transferred from my account to the YMCA of Northern Michigan.

YMCA OF NORTHERN MICHIGAN

523 W. Jefferson Street, etoskey MI 49770 These are the causes we champion:

YOUTH DEVELOPMENT • HEALTHY LIVING • SOCIAL RESPONSIBILITY