Southwest HOOPS

6310 A QUAKER

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**Southwest Hoops Basketball Tournament**

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Event City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Team Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Head Coach:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **State:** \_\_\_\_ **Zip:** \_\_\_\_\_\_\_

**Home Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Cell Phone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Asst Coach:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Asst: Coach Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Asst: Home Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Asst: Cell Phone: (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Circle One: BOYS or GIRLS** **THREE (3) GAMES GUARANTEED**

**Circle Division: Entry Fee: $200.00 unless noted**

**2nd, 3rd,4th,5th,6th,7th,8th**

**JV, Varsity**

**ANY QUESTION’S PLEASE CALL:**

**Tami 806 773 6189 or Cory 806-201-2777**

**Checks Payable to Tami Wilson or Cory Lusk**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
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| **Southwest Hoops** | | | | | | | | | | |
| **ROSTER MUST BE FULLY COMPLETED-PLEASE TYPE OR PRINT-PROOF OF AGE REQUIRED AT GAMES** | | | | | | | | | | |
|  |  | | Team Name: |  |  | Primary Contact: |  |  |  | |
|  |  | | Type ( Girls,Boys ) |  |  | Address: |  |  |  | |
|  |  | | Youth Age Division  3rd,4th,5th,6th,7th,8th, |  |  | City / State / Zip: |  |  |  | |
|  |  | | Hs Division  JV Or Varsity |  |  | Phone Number: |  |  |  | |
| In consideration of participation in this tournament, the undersigned persons hereby releases  ***,***SouthWest Hoops, Southwest Hoops hosting facilities, their officers, employees, volunteers, officials and agents from any and all claims, liabilities, loss of service and cause of action of any kind for personal injury and property damage arising in any way out of said participation. Further, the undersigned persons agree to abide by all tournament and regional rules and regulations. I understand that pictures taken of players, coaches, parents and spectators may be used in promotional materials for ***SouthWest HOOPS BASKETBALL*** either in print or online. By signing my name below, I hereby acknowledge that I have read the above. I understand it and agree to all the terms. Any Seniors who signed a national letter of intent to play any college sport is not eligible to participate in our events. IMPORTANT: ALL PLAYERS UNDER 18 YEARS OLD MUST HAVE A PARENT/GUARDIAN SIGN ROSTER/RELEASE | | | | | | | | | | |
|  | |  |  |  |  |  |  |  |  | |
|  | | Jersey # | Full Name | Phone | Parent /Guardian Signature | Email | | | D.O.B | |
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|  | |  | Coaches Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
|  | |  |  |  |  |  |  |  |  | |

**\*All Players Must Be Listed on this Roster.**

**If you have a player that may not be available the 1st Game.**

**You Must Have them listed on this Form in order to be Eligible to Play in Any Game.**

**Players that have signed a National Letter of Intent to play any college sport is not eligible to play in our events.**

**Checks Payable to Cory Lusk or Tami Wilson**