



BOXOUTBRAND TOURNAMENT- TEAM REGISTRATION

Date: _____

Participant Full Name/ Team Captain: _____

Players DOB (MM/DD/YEAR): _____ Team Name: _____ Shirt Size: _____

Phone Number: _____ Email Address: _____

Player 2 Name: _____ Email: _____ Shirt Size: _____

Player 3 Name: _____ Email: _____ Shirt Size: _____

Player 4 Name: _____ Email: _____ Shirt Size: _____

Player 5 Name: _____ Email: _____ Shirt Size: _____

Player 6 Name: _____ Email: _____ Shirt Size: _____

Player 7 Name: _____ Email: _____ Shirt Size: _____

Player 8 Name: _____ Email: _____ Shirt Size: _____

Player 9 Name: _____ Email: _____ Shirt Size: _____

Player 10 Name: _____ Email: _____ Shirt Size: _____

Method of Payment: Cash () E-mail Money Transfer ()

I understand and acknowledge that BoxOut Brand do not guarantee the security or safety of Basketball Tournament sites, of the areas adjacent to and surrounding Basketball Tournament sites, or of any areas Participants may traverse on their way to or from Basketball Tournament sites.

I hereby grant BoxOut Brand the right to use the name, image, likeness, photograph, and biographical material pertaining to the Participant throughout the world in any and all media, now known or hereby created, in connection with promoting or publicizing the Basketball Tournament or any other endeavor.

Captain Signature: _____