



BOXOUTBRAND TEAM REGISTRATION FORM
COED 3 ON 3 HOLIDAY CHARITY TOURNAMENT
Sunday, December 2nd, 2019

Team fee: \$175 until November 2nd after team fees go up to \$200

Participant Full Name/ Team Captain: _____

Date of Birth (MM/DD/YEAR): _____ **Team Name:** _____

Phone Number: _____ **Email Address:** _____

#2 Name: _____ **DOB:** _____ **Phone Number:** _____

#3 Name: _____ **DOB:** _____ **Phone Number:** _____

#4 Name: _____ **DOB:** _____ **Phone Number:** _____

#5 Name: _____ **DOB:** _____ **Phone Number:** _____

#6 Name: _____ **DOB:** _____ **Phone Number:** _____

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

If you are choosing the payment of cash or Square payment, there must be a \$100 required deposit paid in advance

Please bring team reversible – black & white are preferred

E-transfers must be sent to daniellechong@outlook.com with the password: 3on32018

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.

If there are any questions or concerns please contact Boxoutbrand via email: info@boxoutbrand.com or contact Danielle at (647)226-0409

Captain Signature: _____ **Date:** _____