2016 Round Rock Invitational Registration Form

 January 9th & 10th, 2016

 One (1) team per form/ One (1) check may be sent to cover multiple teams/forms

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| Team Name/High School:        |
| UIL District (i.e. 16-5A)       | Date Submitted:       |
| Declare Tournament Bracket/select one: [ ]  Big School [ ]  Small School |
| Please write the check number on this form and the team name on the check: Check #       |

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| Team Coach/Manager:       |
| Email:       | Phone #:       |
| Team Parent Rep:       |
| Email:       | Phone#:       |

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| Player | Jersey #(if known) | Grad year | High School Attending |
| 1:       |       |       |       |
| 2:       |       |       |       |
| 3:       |       |       |       |
| 4:       |       |       |       |
| 5:       |       |       |       |
| 6:       |       |       |       |
| 7:       |       |       |       |
| 8:       |       |       |       |
| 9:       |       |       |       |
| 10:       |       |       |       |
| 11:       |       |       |       |
| 12:       |       |       |       |
| 13:       |       |       |       |
| 14:       |       |       |       |
| 15:       |       |       |       |
| 16:       |       |       |       |
| 17:       |       |       |       |
| 18:       |       |       |       |
| 19:       |       |       |       |
| 20:       |       |       |       |

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| For Office Use Only |
| Date Received:  | Verify Check # received: |
| Notes: |