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

|  |  |
| --- | --- |
| 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 # | |

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

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

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