

December 14th & 15th, 2019 Williston, ND

www.willistonparks.com/basketball-tournament

ENTRY FORM: Team Name: _____ Coach's Name: _____ Address: _____ Phone #: _____ Email: _____ Grade: (Boys) 3 4 5 6 7 8 (Girls) 3 4 5 6 7 8 Team Rank (circle one): (Best) 8 7 6 5 4 3 2 1 (Lowest) Team ranking is based on the coaches' judgement. We want to make this tourney competitive. Please have all parents/guardians sign the roster which acts as the player liability release: Please read this form carefully and beware that in registering yourself or minor child/ward for participation in the programs, you will be waiving and releasing all claims for injuries you or your child might sustain arising out of the program. A parent or guardian agrees to the following: 1. I will obey all rules and regulations established. 2. WPRD and WSC has the right to bar any person, team or organization from participation if a team or person refuses to comply with said rules and regulations. 3.1 will pay for any damages that I cause to any property, equipment, or facilities owned by WPRD or WSC. 4. I understand that participating in a program and/or event is hazardous and may result in injury to other players, my child/ward or me. 5. I ASSUME ALL RISKS OF INJURY INCURRED OR SUFFERED WHILE PARTICIPATING IN PROGRAMS AND/OR EVENTS OPERATED BY WPRD or WSC 6. I WAIVE ANY CLAIMS FOR DAMAGES, COSTS, EXPENSES OR ATTORNEYS FEES WHICH I HAVE OR MAY HAVE IN THE FUTURE AGAINST WPRD, ITS OFFICERS, EMPLOYEES, VOLUNTEERS, AND AGENTS ARISING FROM OR PERTAINING OR RELATED TO MY PARTICIPATION IN SAID PROGRAMS AND/OR EVENTS. I RELEASE WPRD, WSC AND SAID PERSONS FROM ANY OBLIGATIONS, LIABILITIES, RESPONSIBILITIES, DAMAGES, COSTS, EXPENSES, CLAIMS, DEBTS, AND ATTORNEYS FEES ARISING FROM, PERTAINING OR RELATED TO SAID PROGRAMS AND/OR EVENT PARTICIPATION.

*Brackets will be emailed to coaches no later than Dec. 10th

TOURNAMENT INFO:

Divisions:

3rd – 8th Grade Boys 3rd – 8th Grade Girls

Registration Fee:

\$150 per team (checks only)
Payment must accompany form to reserve your spot. *No refunds after 12/6 registration deadline.

Mail Form & Payment To:

Williston Parks & Recreation District C/O Joe Barsh 822 18th St. E. Williston, ND 58801

Games Played:

3 game guarantee *75 team cap

Deadline to Register: December 6th

For More Information:

Joe Barsh (701) 572-9272 Email: joeb@wprd.us Kyle Harris (320) 630-5586 Email: harris.kyle@rocketmail.com

Uniform #:	Player Name:	Grade:	Phone #:	Parent Signature:	