

Brookwood Falcons
Alumni Basketball Tournament &
Alumni Volleyball Tournament Saturday
March 22 & 23, 2024



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| TOURNAMENT ENTRY FEE: \$15 for Women/Coed VB and \$20.00 for Men BB Optional: Black Alumni T-shirt \$10 Extra | | | |
| NAME: _____ | | | |
| ADDRESS: _____ | | | |
| CITY: _____ | | STATE: _____ | |
| | | ZIP: _____ | |
| E-MAIL: _____ | | <input type="checkbox"/> check if new GRADUATION YEAR: _____ | |
| PHONE: _____ | | SHIRT SIZE: (circle one) Youth 6-8, 10-12, 14-16 Adult: S M L XL XXL+(add \$2) or NOT ordering | |
| WOMEN: Besides the VOLLEYBALL TOURNAMENT, there will be one BASKETBALL GAME if we have enough interested in playing. NO charge if playing VB or \$10 for women's basketball only. DO YOU WANT TO PLAY IN THE WOMEN'S BASKETBALL GAME? (Circle one) YES NO | | | |
| MEN's JERSEY: I am doing an order for black/white reversible sublimated jerseys. \$40. Please let me know size _____ and number _____. Also your last name on the back. See the sample | | | |
| COED VOLLEYBALL: Team would consist of 3-4 men and 3-4 women (spouses/family/significant others allowed). This will begin at 7pm Fri Mar 22th . Please designate a captain for your team and indicate on the back a list of team members. If you could send all forms together for the entire team, that would be appreciated. (If you are playing women's VB or Men's BB you do not need to pay an extra entry fee.) Men that play Coed VB only, entry fee is \$15. | | | |
| Cost: _____ entry fee + _____ T-shirt + _____ \$2 for XXL or larger + _____ BB jersey = Total \$ _____ | | | |
| DO NOT SIGN BELOW UNTIL YOU HAVE READ THE FOLLOWING: SIGNATURE ON THIS FORM VERIFIES THAT I HAVE READ, UNDERSTAND, AND WILL ABIDE BY THIS INFORMATION. I REALIZE THAT THERE ARE POTENTIAL RISKS INVOLVED WITH MY PARTICIPATION IN THIS TOURNAMENT AND ITS ASSOCIATED ACTIVITIES. I AGREE TO RELEASE AND DISCHARGE THE NORWALK-ONTARIO-WILTON SCHOOL DISTRICT, THE BROOKWOOD BASEBALL BOOSTER CLUB, ORGANIZERS, OR VOLUNTEERS FROM ALL ACTION, SUITS, AND DEMANDS WHATSOEVER IN LAW OR EQUITY. BEFORE PARTICIPATING, I WILL INSPECT THE FACILITY AND NOTIFY THE SPONSORS OF ANY POTENTIAL PROBLEMS OR AREAS OF DANGER THAT MAY BE PRESENT. I ALSO GRANT FULL PERMISSION FOR THE ORGANIZERS TO RECORD MY PARTICIPATION IN THIS EVENT AND USE ANY PHOTOGRAPH FOR PUBLICITY WITHOUT REIMBURSEMENT. | | | |
| SIGNATURE: _____ | | DATE: _____ | |
| PLEASE RETURN FORM AND PAYMENT BY March 1th via paypal to hansen.john97@gmail.com or venmo @jhansen09 or Checks payable to: <u>Brookwood Baseball</u> | | MAIL or Email or send photo of form TO: John Hansen 505 Division St. Ontario, WI 54651 608-487-6263 (cell) jhansen1@now.k12.wi.us | |

SCHEDULES WILL BE EMAILED OUT ONCE THEY ARE COMPLETED.

*Search **"Brookwood Alumni on Facebook"** for copies of the forms

*or the school website <http://now.k12.wi.us/>

ADULT CHILDREN of ALUMNI: Adult children of alumni that are not from Brookwood are allowed to play. More than likely parents and children will be placed on the same team.