

MARQUETTE MAY MADNESS--APPLICATION FORM

April 29,30 and May 1
MARQUETTE, MICHIGAN

TEAM NAME: _____

COACH(s)_____

CONTACT INFORMATION:

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ STATE:_____ ZIP CODE: _____

PHONE NUMBER: () _____ EMAIL: _____

DIVISION (CIRCLE ONE):

BOYS: 3RD 4TH 5TH 6TH 7TH 8TH

GIRLS: 3RD 4TH 5TH 6TH 7TH 8TH

PLAYER NAMES:

CURRENT GRADE:

1--	_____	_____
2--	_____	_____
3--	_____	_____
4--	_____	_____
5--	_____	_____
6--	_____	_____
7--	_____	_____
8--	_____	_____
9--	_____	_____
10--	_____	_____
11--	_____	_____
12--	_____	_____

RETURN TO:

DEADLINE: April 16 , 2011

Ben Smith, MSHS Varsity Girls' Basketball Coach
1203 W. Fair Ave.
Marquette, MI 49855

Contact Ben with questions: 906-225-5712/besmith@mapsnet.org

If possible, reserve your team's spot via email