

# 5TH ANNUAL PEPSI COLA CHALLENGE BASKETBALL TOURNAMNET JANUARY 30TH, 31ST 2010 WORLAND WYOMING

Team Coach Name \_\_\_\_\_ Assist Coach Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Phone \_\_\_\_\_

Cell \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_

Team Name \_\_\_\_\_  
Team Level 1 2 3 4 5 6 7 8 9 10

Boys or Girls (circle one)  
(10 being the highest)

Name	Uniform#	Grade
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

**Tournament Contacts**  
Steve Hunt  
307-347-8616  
307-347-3445 Fax  
[www.worlandcommunitycentercomplex.com](http://www.worlandcommunitycentercomplex.com)

These grades are certified correct. I give permission on behalf of the players and their parent for the above named individuals to play in the Pepsi-Cola Basketball Challenge. I understand that the Pepsi-Cola facilitators and the game facilities have no responsibility on behalf of the players; medical expenses.

Each player on my team carries their own accident/health insurance.  
(Players parent's signatures may be obtained in lieu of coach's signature.)

Coach's Signature: \_\_\_\_\_ Date \_\_\_\_\_