REGISTRATION FORM

Bowman County Classic | April 15 - 16, 2023 | Bowman, ND

Entry Fee: $185 (3-game guarantee) **Registration Deadline:** March 17, 2023

TEAM INFORMATION

Team Name (as listed on brackets): _____

City: _____ **Coaches: 1.**_____ **2.** _____

Grade (circle one): **Rank** (based on coaches' judgment - be honest):

Boys: 4 5 6 7 **Girls: 4 5 6 7** Best **1 2 3 4 5** Lowest

TEAM CONTACT PERSON

Name: _____ **Phone:** _____

Mailing Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Email: _____

TOURNAMENT SHIRTS

Take home a tournament shirt! All shirts are pre-sale only. Claim your tournament shirt by ordering them on this registration form. Shirts are $20 a piece. Payment for shirts must be received with entry fee.

Youth S ____ x $20 = $_____
Youth M ____ x $20 = $_____
Youth L ____ x $20 = $_____
Youth XL ____ x $20 = $_____

Adult S ____ x $20 = $_____
Adult M ____ x $20 = $_____
Adult L ____ x $20 = $_____
Adult XL ____ x $20 = $_____

Total ____ x $20 = $_____
+ Entry Fee $185
= $_____

TEAM ROSTER

Please have all parents/guardians sign the roster which acts as the player liability release.

As a parent/guardian of a participating child, by my signature, I hereby give my permission to him/her to participate in the tournament and to release Bowman Area Chamber of Commerce, Bowman County School District, Bowman Parks and Recreation, City of Bowman, and all other entities associated with this event from any liability for injuries which may occur to the said child while participating in this event. I also understand that Bowman Area Chamber of Commerce staff or their representatives may photograph participants involved for future promotions.

Player's Name (First & Last)	**Parent Signature**	**Phone**

Make Checks Payable to Bowman Area Chamber of Commerce
PO Box 1143, Bowman, ND 58623

[or pay by card] # _____ - _____ - _____ - _____ CVV _____ Exp. ____/____

Contact: Shelby Kinkade | shelby@bowmannd.com | 701.523.5880 | bowmannd.com/chamber/classic