



29th Annual Queen City Basketball Classic Entry Form
March 23-25, 2018 • Spearfish, SD

Team Name:

Coach's Name:

Address:

City: State: Zip:

Cell Ph: Email:

Scorer's or Timer's Name:

Division: Girls: 4th 5th 6th 7th 8th 9th 10th-11th
(Check One) Boys: 4th 5th 6th 7th 8th 9th 10th-11th

Team Ranking

1 2 3 4 6 7 8 9 10
weak strong

TEAM ROSTER: Name and Grade

- 1. 7.
- 2. 8.
- 3. 9.
- 4. 10.
- 5. 11. \$5 Extra
- 6. 12. \$5 Extra

We, the team, assume full responsibility for the players' medical expenses and well being and waive all rights against the Queen City Classic and the Spartan Booster Club and all others associated with this tournament from all claims caused by injuries which may be sustained by our people who are participating in this tournament. I understand all conditions and verify that the above information is correct.

Signature of Coach
Or Representative: _____

Mail To: Mark Gould, Spearfish Booster Club, PO Box 853, Spearfish, SD 57783

Make checks for \$180 (for 10-player roster) payable to the Spearfish Booster Club and submit with registration form. Add \$5/player above 10 with a maximum of 12 players. Tournament is limited to 160 teams. Form and payment must be postmarked by March 1, 2018, and team must be one of the first 160 teams to register to be included in the tournament.