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| **39th ANNUAL BCSFYAO** |
| **TAISHO AND ARDENETTES BASKETBALL TOURNAMENT** |
| **APRIL 6-7, 2019** |
|  |  |  |  |  |  |
| **Team Name:**  |  | **Contact Person:**  |   |
| **Division:**  |   | **Address:**  |   |
| **Team Colors:**  |   | **City, State, Zip Code:**  |  |
| **Coach:**  |   | **Cell Phone:**  |  |
| **Assistant:**  |   | **Email:**  |   |
|  |  |  |   |
| **JERSEY #** | **PLAYER’S NAME** | **GRADE** | **DOB** | **HEIGHT** |
| **FEET** | **INCHES** |
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| In order to provide assurances that all communication is directed to the appropriate person, please list only one contact person. All subsequent tournament information will be sent via email. Please list an email address that is checked on a regular basis.  |
|  |  |  |  |  |  |
| Note:  Individual prizes guaranteed for a maximum of 10 players per team. |  |  |  |

Roster changes due no later than **March 8, 2019**. Late requests will need approval from the tournament committee.