

**MAY 8 & 9, 2010 - CHEETAH CHALLENGE**  
**TOURNAMENT REGISTRATION AND ROSTER FORM**



**AAU Club Name/Number:** \_\_\_\_\_ **Team Colors:** \_\_\_\_\_

**2010 AAU Age Level:** 11 12 13 14  
*(please circle)*

**Competition Level:** A B  
*(please circle)*

**Coach Information:**

	Name	Address	Telephone	Email (or Fax)
Head Coach				
Asst. Coach				
Team Contact				

Please list a cell phone number that we can use to reach you during the tournament: \_\_\_\_\_

**Player Roster:**

	Name	DOB	AAU #	Uniform #
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

*Please use separate form for each team entered.  
 Any request for playing times must be submitted in writing with this application.  
 Requests will not be guaranteed, however we will do our best to accommodate your team.*

**Entry Fee: \$400.00**    **Entry Deadline: April 30, 2010**    **Checks made payable to: Western Mass Cheetahs**  
*(non-refundable)*

Please forward checks or money orders to: Irene Sullivan 183 Taylor Street Granby, MA 01033

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*Tournament Registration Only:* Payment Received \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_