



**March 22nd 2015**

**4-6th Grade Girls**

**JustAgame Fieldhouse - Downtown Wisconsin Dells**

**3 Game Minimum**


**\$170 Entry Fee**

**Large and Small school divisions for each age group**

**WBCA State Tournament Trophy for Division Champions**



200 LaCrosse Street Wisconsin Dells, WI 53965  
phone 608-253-6787 fax 608-253-6050 email info@justagamefieldhouse.com  
www.justagamefieldhouse.com

**March 22nd**  
WBCA Hall of Fame  
Shootout  
Endorsed by:   
**4th-6th Grade Girls**

*School Teams Only!*

## DOWNTOWN WISCONSIN DELLS

Registration is also available online at justagamefieldhouse.com on the event page

**ABSOLUTE ENTRY DEADLINE IS March 17th @ 11:00am! or until filled**

Team Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Coach \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email: \_\_\_\_\_  
Ass't Coach \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Email: \_\_\_\_\_

- 3 game minimum
- Two 19 minute halves running clock
- Large & Small school divisions for each age group
- 3 Timeouts per game
- Must provide a qualified person to keep score or time.
- One scorekeeper and two coaches will be admitted free
- **No refunds will be issued if schedule is already released**
- **Entry is not guaranteed until payment is received**
- ***Teams will be emailed 2 weeks prior to submit their season record***

### TEAM INFO

**Circle Gender and Grade**

Gender: Girls  
Grade: 4th 5th 6th  
High School Enrollment: \_\_\_\_\_

### TEAM ENTRY FEE

# \$170

IS DUE WITH THE MAILING OF THIS FORM  
THIS ENTRY FORM MUST BE RETURNED  
WITH PAYMENT NO LATER THAN March 17th  
or until filled

**CHECK 1 DAY PRIOR FOR SCHEDULE CHANGES**

**Schedule will be posted @ justagamefieldhouse.com  
4 days prior to event only!**

**FREE Waterpark passes to MT. Olympus for each participant**

Make Checks Payable To: Justagame Fieldhouse And Mail Entries To: Justagame Fieldhouse 200 La Crosse St. Wisconsin Dells, WI. 53965

Any questions, please call Office (608) 253-6787 Fax (608) 253-6050 Visit our website: Justagamefieldhouse.com

\_\_\_\_ Check Enclosed \_\_\_\_ MasterCard \_\_\_\_ Visa Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ V-Code \_\_\_\_\_

Complete Address of Cardholder \_\_\_\_\_

In signing, I, my heirs, executors and administrators, intending to be legally bound hereby waive and release any and all rights against Wisconsin Dells JustAgame Fieldhouse, host organizations, and representatives from any and all injuries suffered by the coaches and/or players at the specified event.

In signing, I give permission to JustAgame Fieldhouse to release contact information to businesses for the sole purpose of providing opportunities to teams that participate in our events.

Signature \_\_\_\_\_