



4TH ANNUAL

PINK CITY CLASSIC



TEAM REGISTRATION FORM

TEAM NAME: _____

FIRST NAME	LAST NAME	HEIGHT

TEAM CAPTAIN

NAME: _____

EMAIL: _____

PHONE NUMBER: _____

DIVISION - PLEASE CIRCLE

1
MEN'S
(19+)

2
WOMEN'S
(18+)

3
ELEMENTARY
(GIRLS/BOYS) U12
U13, U14

4
HIGH SCHOOL
GIRLS GR.9+10 MIXED
GIRLS GR.11+12 MIXED
BOYS U15, U16, U17, U19

ENTRY FEES

EARLY BIRD OR REGULAR