Official Entry Form

Make check/money order payable to : Five Star Basketball & send this form and payment to Tom Weeaks @ 119 Holly CT. Buffalo, Tx 75831

Tournament Location:_____ Tournament Date: _____ Team Name: _____

Division you plan to play in: _____ Coach's Name: _____ Coach's E-Mail: _____

Coach's Home Address: _____ City: _____ State: _____ Zip: _____

Coach's Home Phone:_____ Coach's Work Phone: _____Coach's Cell Phone: _____

Coach's FAX Number: _____

Player's Name	Jersey #	Height	*Grade	Home Address & City, State, Zip	Home Phone	*Current School

*Grade means the grade the player will be in this next school year

* Current School means the school the player will be attending this next school year