2007 AAU SUPER REGIONAL ROSTER

March 30 - April 1 (14's, 16's) April 5-7 (11's, 13's) April 27-29 (12's, 15's)

AAU Club Name _____ AAU Club # _____ Age Group_____ Division I or II (circle one)

There will be no additions to entry form after the start of your first game. There can only be a maximum of 15 athletes per team. **(Must be filled in above, to qualify)**

List Players in Alphabetical Order Last Name First	Jersey #	Complete Address	AAU Number	Players Sign In At Tournament (Prior to competing)
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				

*Must List Two Adult (18 or Over) Coaches Per Team. In signing this document, I verify that as an athlete/coach, I am a registered AAU amateur athlete/coach, according to the AAU code, and that in consideration of your accepting my entry, I, intending to be legally bound, and my heirs and administrators hereby waive and release any and all claims and rights that I may have against the Amateur Athletic Union, the tournament organization, the owner/lessor/operators of the facilities, and their representatives for any and all injuries or losses suffered by me at said tournament. Held under the sanction of the _____ District of the Amateur Athletic Union of the United States.

*Signature of Head Coach

Print Name of Head Coach and AAU Number

Print Address, City, State, Zip

Home Phone Cell

Work Phone Email

Signature of Assistant Coach

Print Name of Assistant Coach and AAU Number

Print Address, City, State, Zip

Home Phone Cell

Work Phone Email