

**TEAM ROSTER SHEET**  
**2016 Summer League**

Name of School _____
Site: _____
Coach _____
Coach's Address _____
City, State, Zip _____ Coach's Email: _____
Home Phone Number: _____ Work Phone Number: _____

\$ 395.00 entry fee enclosed? Y N (Entry fees must be received by May 20, 2016-

Make all checks payable to: "Pittsburgh Basketball Club"

Return application to:  
Pittsburgh Basketball Club  
2016 Summer League  
919 Al Smith Drive  
McKees Rocks, PA 15136

**PLEASE COMPLETE BELOW IN FULL-THIS IS AN INSURANCE ISSUE!**

	NAME	GRADE	ADDRESS	PHONE NUMBER
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

**PLEASE NOTE**

**TO INSURE THE TOURNEY IS FAIR TO ALL PARTICIPANTS,  
ALL AREAS MUST BE COMPLETED TO INSURE THAT NO AAU OR  
ALLSTAR TEAMS ENTER THE TOURNEY. SHOULD ANY INFORMATION  
PROVIDED BE PROVEN TO BE FALSE, YOU WILL BE IMMEDIATELY  
DISQUALIFIED FROM THE TOURNEY WITH NO ENTRY FEE REFUND.**