FAMILY Sports Park FIRST

T.A.K.E. ABC

Registration Form

2004 T.A.K.E./ABC Girls Summer Basketball Classic

Division: ❒ 13 & under ❒ 14 & under ❒ 15 & under ❒ 16 & under ❒ 17 & under ❒ High School Varsity

Team Name:_____

Head Coach:_____

Address:_____

City:_____ State:_____ Zip:_____

Phone: (_____)_____-_____(day)

Phone: (_____)_____-_____(eve)

Fax: (_____)_____-_____

My team is: ❒ Commuting ❒ Staying at Family First Sports Park ❒ Staying at a local hotel ❒ I have enclosed my entry fee of $300.

Make checks payable and return the enclosed registration form and your payment to:

Family First Sports Park
8155 Oliver Road
Erie, PA 16509
Attn: TAKE ABC
Fax: (814) 866-8066

**Mail typed roster by July 4, 2004 to be included in college coaches' packets.*

Please type roster. Include year of graduation, high school address and HS and AAU coach and telephone number. College coaches need this information to evaluate and contact players.

For more information, call toll free 1-888-846-7275.

T.A.K.E. abc
Youth Basketball Tournament

Girls Summer Basketball Tournament
13 & Under-17 & Under & High School Varsity Divisions

July 23–25, 2004