



## 21st Annual 3 on 3 Tournament January 21st, 2017

Open to girls and boys in 3<sup>rd</sup> through 8<sup>th</sup> grades  
Form your own team made up of 3-4 players  
All teams are guaranteed to play at least 3 games

Awards will be given for the 1st, 2nd and 3rd place team in each division.

\$20.00 Fee/Per Player

Fee includes a tournament t-shirt

All Games Will Be Played At Parkland

**Complete all team information on the back of this entry.**

*Mailed entry forms must be RECEIVED no later than Wednesday, January 4th, 2017*

### *Send Entries to*

Brian Schweitzer		Blaine Brannon/Christina
McHenry Middle School		Conklin
2120 West Lincoln Road	or	Parkland School
McHenry, IL 60051		1802 N. Ringwood Road
		McHenry, IL 60050

Entries can also be turned in the offices at McHenry Middle School and Parkland School.

All entry fees must be included. Both sides of this entry must be completed.

Starting Times will be posted at [www.d15.org/parkland/](http://www.d15.org/parkland/) and [www.d15.org/mchenry/by](http://www.d15.org/mchenry/by)  
January 9th, 2017

**Team Name:** \_\_\_\_\_  
(if you do not list a name, one will be assigned to you)

**Division:(circle please)** Boys Girls

**Grade:(circle please)** 3<sup>rd</sup>/4<sup>th</sup> 5<sup>th</sup>/6<sup>th</sup> 7<sup>th</sup>/8<sup>th</sup>

**T-Shirt Sizes (adult sizes only) – Please enter the total number needed of each size**

Extra					Extra
Small	_____	Small	_____	Medium	_____
				Large	_____
					Extra
					Large
					_____

*If you are interested in scorekeeping, timekeeping or officiating, please contact Ms. Brannon at [bbrannon@d15.org](mailto:bbrannon@d15.org), or Mrs. Conklin at [cconklin@d15.org](mailto:cconklin@d15.org).*

### Questions

Contact Ms. Brannon or Mrs. Conklin at Parkland: 815-385-8810  
or Mr. Schweitzer at M.M.S. 815-385-2522.

**Make checks payable to Parkland School PTO**

## You may use multiple forms and staple them together

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Name	Phone	T-Shirt Size
Address	Medical Concerns	

Waiver of Liability: (Read before signing)  
I understand that during any physical activity (training, performing or competing) there is a risk of accident or injury. School District #15 will assume no responsibility for injury or accidents which may occur during this activity (3 on 3 Tourney). I hereby give my daughter/son permission to participate by signing above (no signature, no play)

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Parent Signature

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Name	Phone	T-Shirt Size
Address	Medical Concerns	

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Parent Signature

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Name	Phone	T-Shirt Size
Address	Medical Concerns	

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\_\_\_\_\_  
Parent Signature

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Name	Phone	T-Shirt Size
Address	Medical Concerns	

Waiver of Liability: (Read before signing)  
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\_\_\_\_\_  
Parent Signature