



## 2010 Team Entry Form

Please complete and submit this form with your team's full entry fee by Wednesday, May 5<sup>th</sup>. Teams not registered by May 5<sup>th</sup> may not be able to join the league this year.

We are anticipating 22 teams this year (14 HS & 8 JH). Therefore, we will use the following procedure to register:

- Entry into Miracle Basketball League 2010 is on a first-come, first-served basis.
- Teams will choose their jersey color in the order that team registration (including entry fee) is received.
- Upon receipt of team registration (with registration fees), we will send you:
  - Coach Registration
  - Player Registration
  - 2010 League Rules

**Church or Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Team's Contact Person\*:** \_\_\_\_\_

**Contact Phone:** \_\_\_\_\_ **Contact Email:** \_\_\_\_\_

Team	Division	Team Name or Nickname	Head Coach	Phone
1	HS / JH	_____	_____	_____
2	HS / JH	_____	_____	_____
3	HS / JH	_____	_____	_____

**Scheduling Restrictions:**

Are there any restrictions that you would like the League to consider when scheduling games for your team/s? We will try to accommodate for conflicts with church / organization functions.  
We will do everything we can to accommodate your scheduling needs.

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Entry Fee:**

Registration fees for Miracle Basketball League 2010 are \$350 for the first team entered, and \$250 for additional teams from the same church or organization. Fees are to be submitted with this form and the rest of your team's registration. Registration fee increases to \$400 for the first team, if received after May 5<sup>th</sup>.  
*Acceptable forms of payment are cash and check.*

Checks should be made payable to **GRIP Outreach For Youth**.  
Please note "Miracle Basketball League Registration" on your check's memo line.

Send registration checks directly to:  
 GRIP Outreach For Youth  
 Attn: Chy Robins  
 P.O. Box 10310  
 Chicago, IL 60610

**For Office Use Only**

Date Received: \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Check # \_\_\_\_\_

Proof of Insurance: \_\_\_\_\_

\* Note: Miracle Basketball League staff will be in direct communication with your team's contact person before and during the 2010 season. It is his/her responsibility to communicate information & details to your coaches, players, parents/guardians, and church's / organization's leadership.