

OPTIMI presents:



Saturday, February 18th, 2012
Check-in (*with Photo ID*) begins @ 9:45am

REGISTRATION FORM

REGISTRATION ENDS Wednesday, February 15th, 2012

Team Name: _____

Captain*: _____ Captain Phone #: _____

**for contact purposes only*

Name: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____

Email: _____

Team Member Names:

1. _____

2. _____

3. _____

4. _____

REMINDERS

Registration fee is \$40/team. Registration fee includes Big Dribble shirt. Cash or Check (made out to UAF/Optimi) only, please. All proceeds to benefit Arizona Assurance Scholarship Fund. The registration fee is not a tax deductible contribution. Online team registration is available at www.uafoundation.org/events/BigDribble.

- **Registration ends** Wednesday, February 15th, 2012 at 5:00 pm. Payment must be received by this deadline or else entry will not be accepted. **NO EXCEPTIONS.**
- Tournament games will take place at **Mansfeld Middle School Basketball Courts, located on E. 7th Street, between Santa Rita Ave. and Mountain Ave,** just a block south of UA Campus.
- Brackets will be emailed - **please arrive at 9:45 am** for check-in.
- Participants must be 18 years of age or older. Photo ID is required.
- Questions? Email: johnsonk@email.arizona.edu

Facebook: Optimi Big Dribble 3-on-3 Basketball Tournament

I, the under signed, hereby authorize any first aid, medication, medical treatment or surgery deemed necessary in case of an emergency for the above player in Optimi's Big Dribble tournament play. I, the under signed, in consideration of the players participation in Optimi's Big Dribble Tournament intending to be legally bound, do hereby ourselves, executors, and administrators waive, release, and forever discharge any and all rights and claims for damages, including any claims for loss, damages or injury to our persons or property arising out of the above player's performance or failure of performance from the Optimi's Big Dribble Tournaments, their agents, representatives, successors and assigns.

I release Optimi, the UA Foundation, the University of Arizona, the Arizona Board of Regents and the tournament staff from all claims for any injuries or accidents that may be sustained by me or my team members while voluntarily participating in the tournament.

Team Member Signature - Required:

1. _____
2. _____
3. _____
4. _____

Team Captain Signature: _____ Date: _____

Team Captain Print Name: _____