SAAU GIRLS' BASKETBALL
LA. & MS. STATE TOURNAMENT
MAY 18, 19, 2019

ALL GAMES WILL BE PLAYED AT CHAPPAPEELA SPORTS COMPLEX GYM- 19325 HIPARK BLVD. HAMMOND, LA 70403.

This form with a money order or cashiers' check for $365.00 per team to be made payable to DOMINO'S BASKETBALL must be returned by April 27, 2019. Mail to: P.O. Box 640191-Kenner, LA 70064, ATTENTION: Rhonda Mele. Please make sure you put the name of the club and age group on money order or Cashier's check! AAU cards, Birth Certificates, and Report Cards will be checked at the tournament before your first game. ROSTERS WILL BE DONE ONLINE AT THE NATIONAL WEBSITE! PLEASE have all these things in by the Entry Deadline, OR you WILL NOT be allowed to play in the State Tournament!!

TEAM NAME: _____

Name of Coach: _____

Coaches Info: _____
Street Address

City/State/Zip: _____

Home Phone: ( )_____Work Phone: ( )_____

Cell Phone: ( )_____Fax: (_____

E-mail: _____

CIRCLE ONE D1 D2

CIRCLE THE GRADE YOUR TEAM WILL PLAY IN:

5th 6th 7th

YOU MUST ENTER EACH TEAM WITH A SEPARATE FORM. FOR MORE INFORMATION PLEASE CONTACT CHUCK DORVIN- (504) 666-2437 OR E-MAIL CHUCK AT: CHUCKDORVIN@BELLSOUTH.NET

SAAU GIRLS' BASKETBALL
LA. & MS. STATE TOURNAMENT
JUNE 7, 8, 9, 2019

ALL GAMES WILL BE PLAYED AT PENNINGTON RECREATION CENTER/SELU – HAMMOND, LA.

This form with a money order or cashiers' check for $365.00 per team to be made payable to DOMINO'S BASKETBALL must be returned by May 17, 2019. Mail to: P.O. Box 640191-Kenner, LA 70064, ATTENTION: Rhonda Mele. Please make sure you put the name of the club and age group on money order or Cashier's check! AAU cards, Birth Certificates, and Report Cards will be checked at the tournament before your first game. ROSTERS WILL BE DONE ONLINE AT THE NATIONAL WEBSITE! PLEASE have all these things in by the Entry Deadline, OR you WILL NOT be allowed to play in the State Tournament!!

TEAM NAME: _____

Name of Coach: _____

Coaches Info: _____
Street Address

City/State/Zip: _____

Home Phone: ( )_____**Work Phone: ( )**_____

Cell Phone: ( )_____**Fax: (**_____

E-mail: _____

CIRCLE ONE **D1** **D2**

CIRCLE THE GRADE YOUR TEAM WILL PLAY IN:

8th **9th** **10th** **11th**

YOU MUST ENTER EACH TEAM WITH A SEPARATE FORM. FOR MORE INFORMATION PLEASE CONTACT CHUCK DORVIN- (504) 666-2437 OR E-MAIL CHUCK AT: CHUCKDORVIN@BELLSOUTH.NET