



**2016 NORCO ROLLING DEVILS
WHEELCHAIR BASKETBALL TOURNAMENT**
"Celebrating 70 years!"

TEAM REGISTRATION FORM

TOURNAMENT DATE: October 22-23, 201

REGISTRATION DEADLINE: October 13, 2016

REGISTRATION FEE: \$250 PER TEAM

Team Name: _____

Team Color: _____

Team Contact: _____

Phone: _____

Address: _____

Email: _____

TEAM MEMBERS

NAME (PLEASE PRINT)	JERSEY #	T-Shirt Size
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

COACHES & SUPPORT STAFF

NAME (PLEASE PRINT)	TITLE/ROLE	T-Shirt Size
1.		
2.		
3.		
4.		



PLEASE FILL OUT REGISTRATION PACKET AND RETURN WITH CHECK PAYABLE TO:
City of Norco
Dept. of Parks, Recreation & Community Services
2870 Clark Avenue, Norco, CA 92860

*INFO: Tournament Directors Richard Boyle at Richard-Boyle@sbcglobal.net (909) 731-2005
or Jerry Eagans at gweag@aol.com (951) 684-2520.*

NORCO ROLLING DEVILS WHEELCHAIR BASKETBALL TOURNAMENT

TEAM PROFILE

Please complete the following and return to CITY OF NORCO. Please provide a team photo (if possible) with this form or submit a digital file to manglin@ci.norco.ca.us. This is the information which will appear in the tournament program.

Team Name:

Home City/Province:

Please provide a description / narrative of your team that you would like to appear in the tournament program and media releases. (In addition to team info this is an opportunity to thank sponsors or other supporters of your group.)

Information you may wish to include:

- How and when was your team formed?
- Highlights from your team's or team member's accomplishments
- Any other interesting facts about your team, players &/or coach(s).

VOICE & IMAGE RELEASE

I hereby grant to the City of Norco its respective licensees, successors and assigns (herein collectively called the "Licensed Parties"), the right to perpetually use, publish and copyright my name, voice, picture, portrait, likeness, occupation and testimonial in all media for the City of Norco.

I understand there will be no monetary remuneration for my participation in any advertising or promotion.

I understand that nothing herein obligates the Licensed Parties to use my name, voice, picture, portrait, likeness, occupation and testimonial in any advertising or promotion.

I release the Licensed Parties from any liability or damages resulting from the use of my name, voice, picture, portrait, likeness, occupation and testimonial in the manner described herein.

NAME (PLEASE PRINT)	SIGNATURE
1.	
2.	
3.	
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