

# St. Jude the Apostle Parish

presents

## February 2012 Sixth Grade Girls Basketball Tournament Feb. 17, 18, 19

You are invited to join the two St. Jude Sixth Grade girls teams in the beautiful St. Jude activity center, 734 N. Glenview Ave. (Wisconsin Ave. and 84<sup>th</sup> Streets), Wauwatosa, WI for three days of basketball fun!

- Eight-team tournament (three games per team)
- Trophies for first and second place teams, and consolation winners
- T-shirts for each member of the first and second place teams
- Halftime free throw contests on Saturday night
- Players introduced on Opening Night
- Coaches hospitality room
- Lots of other fun stuff!

**Fee:** \$140 payable to the St. Jude Athletic Association (We will take the first eight teams signed)

### Rules:

- All players must be on a current Milwaukee Archdiocese Team.
- Coaches are responsible to comply with all Archdiocese Rules and must monitor the behavior of themselves, their players and their fans.
- Notre Dame/Don Bosco Rules Apply.

**Registration deadline is Friday, January 27, 2012**

**FOR MORE INFO- PLEASE CALL TOURNAMENT DIRECTOR**

Joe DiGiovanni at (414) 331-7880  
OR EMAIL: [JoeDiGiovanni@AOL.Com](mailto:JoeDiGiovanni@AOL.Com)

# 2012 St Jude the Apostle

All games are Feb. 17, 18 and 19, 2012

The following 6<sup>th</sup> Grade Girls are either enrolled students or religious education students of the \_\_\_\_\_ Parish in the Milwaukee Catholic Archdiocese.

UNIFORM#	PLAYER NAME
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____
11. _____	_____
12. _____	_____
13. _____	_____

By signing below, I verify that the above roster is the same as my **6<sup>th</sup> Grade Team** league roster. None of the players listed above have been added from another team or combined to form this team. I acknowledge any infractions to the above will result in disqualification from the tournament and no monies will be returned.

Coach's Name \_\_\_\_\_

Current Record: \_\_\_\_\_

Coach's Signature \_\_\_\_\_

Coach's Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Asst Coach's Names \_\_\_\_\_

Uniform Color \_\_\_\_\_

Team Nickname \_\_\_\_\_

Please indicate any known or potential conflicts. The tournament scheduler will take this into consideration in creating tournament brackets: \_\_\_\_\_