



2019-2020
St. Matthias Bulldogs
Basketball Tournament Schedule

**We're proud of our facilities and in the professional manner that all of our tournaments are run!
Come enjoy a fun, lively, and competitive atmosphere at St. Matthias!**

5th Grade	Girls..... No Tournament
	Boys February 6-8
6th Grade	Girls "B" February 27- 29*
	Boys 'A'..... February 20- 22
7th Grade	Girls 'A' January 3- 5
	Girls "B" January 30,31, February 1*
	Boys "A"..... January 16-18
8th Grade	Girls 'A' January 10-12
	Boys "A" February 14-16
	Boys 'B' December 12-14*

* For 7th and 8th grade 'B' tournaments: 'B' teams or schools with only one team AND who finished below .500 last season may enter.

Important Information

- All teams guaranteed 3 games. (Based on full tournament)
- Individual trophies awarded for 1st, 2nd, 3rd, and consolation champions
- Team trophy for tournament champion
- Medals awarded to all other participants in 5th and 6th grade

Sign Up

- Please make check for \$150 payable to: St. Matthias Athletics
- Mail check and roster to Tammy Pfannerstill 3502 s49th street Greenfield WI 53220
- Contact tammy.pfannerstill@yahoo.com, 414-810-9190
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Only Archdiocese league teams eligible. NO all-star/AAU teams. Parkview league rules will be used.

2019-2020 St. Matthias Basketball Tournament Registration Form

The following are students of the _____ Parish and are presently enrolled in the _____ grade or below as of September 1, 2019. Students who are enrolled in a religious education program at the above named parish are also eligible.

	PLAYER NAME	UNIFORM #(numerical order please)
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 league roster and that no players were added from another team or combined to form this team. I acknowledge any infractions to this rule will result in disqualification from the tournament and no monies will be returned.

Coach's Name _____	Current Record _____
Coach's Signature _____	Circle (if applies) A or B
Coach's Address _____	Phone _____
E-mail _____	
Asst Coach's Names _____	
Uniform Color _____	Team Nickname _____

Please indicate any known or potential conflicts. The tournament scheduler will take this into consideration when making out the brackets. _____

Please make \$150 check payable to St. Matthias Athletics. Mail check and completed roster to:
 Tammy Pfannerstill 3502 s 49th street Greenfield WI 53220