



Be a part of this two-day Crime Stoppers Classic, March Madness Basketball Tournament. Should you need additional information please contact Bryant Hinson @ (803) 920-1835 or bhinson@forest-acres.org.

Signature/s Required, if signed up online form can be mailed in or signed the day of event. Form must be signed prior to event so please arrive early and go to sign up table in main gym.

Please make all checks payable to Crimestoppers of the Midlands

Mail completed form, Waiver, and \$125.00 entry fee for 3 on 3 to:

Crimestoppers of the Midlands
PO BOX 8385
Columbia, SC 29202

Att: Crimestoppers Classic 3on3

Team sign up sheet

Captain

Last _____ First Name _____

Height _____ Male _____ Female _____

Address _____

Age: _____ Birth Date: _____

City: _____ State: _____ Zip: _____

E-mail _____

Phone 1 _____ Phone 2 _____

Signature/s Required

I have read and will abide by the rules and regulations and Liability Waiver.

Player _____ Date _____

Parent/Guardian _____ Date _____

(Player and parent/guardian signatures required if player is under 18)

Player 2

Last _____ First Name _____

Height _____ Male _____ Female _____

Address _____

Age: _____ Birth Date: _____

City: _____ State: _____ Zip: _____

E-mail _____

Phone 1 _____ Phone 2 _____

Signature/s Required

I have read and will abide by the rules and regulations and Liability Waiver.

Player _____ Date _____

Parent/Guardian _____ Date _____

(Player and parent/guardian signatures required if player is under 18)

Player 3

Last _____ First Name _____

Height _____ Male _____ Female _____

Address _____

Age: _____ Birth Date: _____

City: _____ State: _____ Zip: _____

E-mail _____

Phone 1 _____ Phone 2 _____

Signature/s Required

I have read and will abide by the rules and regulations and Liability Waiver.

Player _____ Date _____

Parent/Guardian _____ Date _____

(Player and parent/guardian signatures required if player is under 18)

Player 4

Last _____ First Name _____

Height _____ Male _____ Female _____

Address _____

Age: _____ Birth Date: _____

City: _____ State: _____ Zip: _____

E-mail _____

Phone 1 _____ Phone 2 _____

Signature/s Required

I have read and will abide by the rules and regulations and Liability Waiver.

Player _____ Date _____

Parent/Guardian _____ Date _____

(Player and parent/guardian signatures required if player is under 18)