Entry Form Bismarck State College
Frank Gilchrist Youth Tourney
Boy’s April 14-15, 2012

Team Name_________________________________________

Day Time Contact Name:__________________________Day Time Telephone________________________

Address:________________________________________City/State/Zip:_____________________________

Grade (circle one) 4 5 6 7 8

REGISTRATION & REFUND DEADLINE: THURSDAY, APRIL 5, 2012
ENTRY FEE: $125.00 *Please* write one check per team/per tournament and make check payable to Bismarck State College

By signing below I hereby acknowledge the health of my son to be ready for vigorous activity at the BSC Mystic Athletic Club Tournament and authorize the directors to secure any emergency treatment deemed necessary and that I hereby release tournament directors, coaches, BSC and all employees from all such claims on account of any injuries which may be sustained by my son while attending the tournament. I also understand that BSC and the tournament staff are not responsible for any medical expenses or bills incurred by my son while attending the tournament.

(Please Print Legibly in Numerical Order by Uniform Number)

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<th>Name</th>
<th>Grade</th>
<th>Telephone #</th>
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Please make sure that each parent/guardian has signed the roster/release form. **Entry form will not be accepted if incomplete.**

Mail Check and Roster to: BSC Athletic Department
P. O. Box 5587
Bismarck, ND 58506-5587

Questions? (701) 224-5480

Brackets will be available online no later than the Tuesday preceding the tournament at [www.bismarckstate.edu/athletics](http://www.bismarckstate.edu/athletics) (click on “youth tournaments”). No refunds will be made if notified after the registration deadline listed above.