DEADLINE

Last day to register is Tues., May 15, 2019

Specify Divis	ion (Circle C	ne)		
Men's	Women's	Co-l	d	
Team Name:				
Team Captai			se print leg	
Name:				
ADDRESS:				
CITY:				
PHONE:				
AGE:	BIRTHD	AY:		
SIGNATURE:				
PLAYER 2		Plea	se print leg	ibly
Name:				
ADDRESS: _				
CITY:				
PHONE:				
AGE:				
SIGNATURE:				

For more info and to turn in registration forms, contact:

Gazel D. Giles

Jackson Ave. Center, Rm L06
Email: gdgiles@olemiss.edu
Phone: 662-915-2666

Entry Deadline: May 15, 2019

PLAYER 3	Please print legibly		
Name:			
	STATE		
PHONE:			
AGE:	BIRTHDAY:		
SIGNATURE:			
PLAYER 4	Plea	se print legibly	
Name:			
	STATE		
PHONE:			
AGE:	BIRTHDAY:		
SIGNATURE:			
PLAYER 5	Plea	se print legibly	
Name:			
CITY:	STATE	ZIP	
AGE:	BIRTHDAY:		
SIGNATURE:			

**Liability Waivers, Injury Release, and/or Code of Conduct must be signed on day of event before a player is eligible to participate!



WHEN:

FRIDAY, MAY 17, 2019 1:30 – 3:30 PM GAMES

START AT 1:30 PM

ENTRY DEADLINE:

Tues., May 15, 2019

WHERE:

Turner Center

PRE-REGISTRATION IS REQUIRED