

**In State/Out State Basketball Tournament
Hosted by:**



Roster and Spectator Form

COACHES

	Name	Phone Number
1		
2		

PLAYERS

	Name	Phone Number
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		

**SPECTATORS-
\$10 per Wristband**

	Name	Phone Number
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

One team representative needs to hand in this form with \$120 (Cash or Check made out to MN COMETS) prior to the team's first game.