

MPS Adaptive Athletics
**Team Basketball Tournament
Entry Form**



Make as many copies as you need. One entry form per team. Please return entry form via school delivery to Annie McGinnity, Recreation-Adaptive Athletics or fax to (414) 647-6079 by **Friday, January 20, 2012.**

School _____ Coach _____

Team Name _____

Team Level (circle **one**): 1 2 3 4 5 6 7 8 9 10
Highest Lowest

Athlete's Names (Last name, first name, in alphabetical order. Please print clearly.)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____



MPS ADAPTIVE ATHLETICS
Milwaukee Recreation
Department of Recreation and Community Services
"Experience Life."
Phone: (414) 647-6060 Fax: (414) 647-6079
Website: www.milwaukee recreation.net/adaptive/adaptive-athletics