2015 STATE INDOOR SPORTS TOURNAMENT
BASKETBALL SKILLS ATHLETE ROSTER

Please Print Clearly:

Agency Number: _____ Agency Name: _____

Head Coach: _____ Cell #: _____

	ATHLETE NAMES (ALPHABETICAL: LAST NAME, FIRST)	M/F	W/C [X]	EVENT CODE	BB HOOP HEIGHT	BB SIZE MEN/WOMEN	BOUNCE/ CHEST PASS**	*HOUSING
1.			☐					☐
2.			☐					☐
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24.			☐					☐
25.			☐					☐

**RETURN THIS FORM TO YOUR REGIONALOFFICE WITH STATE REGISTRATION MATERIALS
BY DEADLINE DATE!**

List athletes in alphabetical order by last name.
*See information on Event Description Page
**Must designate chest or bounce pass for Level II Catch and Pass Skill