

**2009
TRAVIS
COUNTY
SHERIFF'S
SHOOTOUT**



**Basketball Tournament
June 12-14, 2009**

- Supporting Positive Youth Development.
- Featuring Travis County Sheriff's Office and Austin Toros.
- Opening ceremony and Celebrity Shootout at 7pm, June 12 at the AISD Wilhelmenia Delco Center, 4601 Pecan Brook, Austin, 78724.
- Tournament for boys and girls with three-game guarantee.
- Games will begin at 8am, Saturday, June 13 and commence on Sunday evening, June 14.
- Normal high school rules with stop clock on all dead balls for all age divisions.
- Registration deadline is June 1, 2009.
- T-shirts will be provided for 12 players and two coaches per team. Please enter T-shirt sizes below.
- Fax registration forms to Kimberly Orts, (512) 854.4719.

Boys & Girls Divisions

- 2nd Grade
- 3rd Grade
- 4th Grade
- 5th Grade
- 6th Grade
- 7th Grade
- 8th Grade
- 9th Grade
- 10th Grade
- Varsity (17 & up)

Team Registration is \$250 with a three-game guarantee. Early registrations and payments received by April 30 are only \$200. Boys and Girls Divisions are available. Registration closes June 1, 2009. When teams register early, multi-team league registration fees will be only \$175, if registered by April 30. After the early registration deadline, three teams or more register for \$225.

For more information:

Kimberly Orts, (512) 854.3248 or kimberly.orts@co.travis.tx.us
www.tcsheriff.org/outreach/shootout

3RD ANNUAL TRAVIS COUNTY SHERIFF'S SHOOTOUT REGISTRATION FORM

TEAM RATING: *Excellent* (top 25 in the country), *Very Good* (top 100), *Good* (strong & competitive), *Fair*, or *Local Competitive*.

Team Name _____ Team Rating _____
 Division _____ Coach Name _____
 Contact Name _____
 Address _____ City/State/Zip _____
 Phone (H) _____ (C) _____

T-SHIRTS

Youth MED ____ Youth LG ____
 Adult SM ____ Adult MED ____ Adult LG ____ Adult XL ____ Adult 2XL ____

The undersigned, being the coach of the team named above, hereby agrees to hold the tournament, the officers and directors faultless in the event of injury or other harm occurring to the team's players during the participation in all tournament events. Coach assures the tournament that adequate medical insurance is available and, if necessary, will be responsible for any medical expenses.

Signature _____ Date _____

Please fax registration to Kimberly Orts at (512) 854.4719. Teams are not confirmed until full payment is received. Personal checks, cashier's checks and money orders are all acceptable. Make payable to "Austin Children's Shelter" and mail to Travis County Sheriff's Office, Attention: Kimberly Orts, P.O. Box 1748, Austin, Texas, 78767.