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www.nbthoops.com

NEXT BIG THING

Milwaukee, Wisconsin

REGISTRATION FORM

Divisions of Play: BOYS

- 3rd Grade 9-Under
- 4th Grade 10-Under
- 5th Grade 11-Under
- 6th Grade 12-Under
- 7th Grade 13-Under
- 8th Grade 14-Under
- 9th Grade 15-Under
- 10th Grade 16-Under
- 11th/12th Grade 17/18-Under

Divisions of Play: GIRLS

- 5th Grade 11-Under
- 6th Grade 12-Under
- 7th Grade 13-Under
- 8th Grade 14-Under
- 9th Grade 15-Under
- 10th Grade 16-Under
- 11th/12th Grade 17/18-Under

Host : NBT

Off.: (866) 727-2887, Cell : (262) 247-5696

E-mail : nbthoops1@gmail.com, nbthoops@gmail.com
Website : www.nbthoops.com

NBT (NEXT BIG THING) PLEASE CHECK

SPRING JAM

April 26-28, 2019

MAY CLASSIC JAM

May 17-19, 2019

SUMMER JAM

June 29-30, 2019

SUMMER MADNESS

July 19-21, 2019

NATIONAL BASKETBALL TOURNAMENTS (NBT) ENTRY FORM

(Register via online regular mail, e-mail, phone, or fax)

TEAM NAME: _____ DIVISION(S): _____

Head Coach: _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (cell) _____ (Home) _____ (Work): _____ Fax: _____

Assistant Coach: _____ Email: _____ Phone: _____

Contact Person: _____ Email: _____

Phone: (cell) _____ (Home) _____ (Work): _____ Fax: _____

Signature: _____ Date: _____

Please note that your team is not confirmed in the tournament until full payment is received.

NO REFUNDS WILL BE ISSUED IF YOU CANCEL REGISTRATION.



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PAYMENT

Registration Deadline: Please Check Online

(NO REFUNDS WILL BE ISSUED IF YOU CANCEL REGISTRATION)

Methods of Payment: Cash Certified Check Money Order Regular Check-Credit Card

(Note: Checks/Money Orders made payable to NBTHOOPS)

Please note NBT office should receive personal/club/business Checks one week before the deadline

NSF Personal/club/business Check will be charged additional \$ 50 processing fee

CREDIT CARD INFORMATION (circle one):

For online Payment please visit www.nbthoops.com and pay at Team registry

M/C VISA AMEX DISCOVER

FEES

(U 9 - U 18)

\$300 SINGLE TEAM

\$250 MULTIPLE TEAMS

NATIONAL TOURNAMENT

\$450 SINGLE TEAM

\$400 MULTIPLE TEAMS

Card No. _____

Expiration Date: _____ 3/4 Digit Security Code (see last 3/4 digits on back of card): _____

Name on Card: _____ Amount Due: \$ _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Card Holder Phone: _____ Card Holder Signature: _____

(NO REFUNDS WILL BE ISSUED IF YOU CANCEL REGISTRATION)

www.nbthoops.com

Club Discount Code :

(Check with your AAU/Basketball Club for Discount code)

IN PERSON: Call (262) 247-5696 for details
**(All Scanned entries must include credit card
Payment information and signature)**

BY MAIL:

Send registration with appropriate fee(s):

NBT HOOPS

4392, S. Kansas Avenue, St. Francis WI 53235



