Text

Description automatically generated

Multi Sports Kingdom

Independent Team Information Form

Team Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Coach: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Coach Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Team Organizer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Grade \_\_\_\_\_\_\_\_\_\_\_ Level (A, A/B, B, B/C or C)\_\_\_\_\_\_\_\_\_\_\_

Number of Practices \_\_\_\_\_\_ Half or Full Court \_\_\_\_\_\_\_\_\_

*(full court: $110/hr, half court: $70/hr, CJB full practice court $80/hr)*

Practice Request: Day of Week\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time\_\_\_\_\_\_\_\_\_\_\_ Location \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of MJBL Games \_\_\_\_\_\_\_\_\_

*(14 games: $1,525, 12 games: $1,325, 10 games: $1125, 8 games: $925)*

Tournaments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*List Tournament Name & Number of Games*

Invoice players individually (Y or N) \_\_\_\_\_ Include Coach Pay in Invoices (Y or N): \_\_\_\_\_\_

*If no, who should invoice be sent to\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

Coach fee: $\_\_\_\_\_\_\_ per event OR Coach fee $\_\_\_\_\_\_\_\_\_ for entire season

Additional Comments: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Uni # | Player Name | Grade | Phone | Email |
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Please submit FULLY COMPLETED form to [basketball@monroeportscenter.com](mailto:basketball@monroeportscenter.com) or to the desk at any location

