



PUSH YOURSELF™ CLASSIC

AAU TOURNAMENT

MAY 7 - 8, 2011

REGISTRATION FORM

Circle age and division **Divisions: 11U 12U 13U 14U 15U 16U 17U**

TEAM NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE () _____

WORK PHONE () _____

EMAIL ADDRESS _____

**Registration & entry fee
deadline:
April 27, 2011**

**Make check payable to:
RAP - Rochester Area Players**

**Mail this form and \$350.00
Registration Fee to:**

**ROCHESTER AREA PLAYERS
216 Hurstbourne Rd
Rochester NY 14609**

Please list names of coach and players below

Coach

Players

Philip Valenti

RAP Co-Director

Phone: 585-739-0161

Fax: 585-586-5079

philipjvalenti@gmail.com