



AHEPA MARROW National Invitational Tournament Registration 2017 Form

Please check the appropriate box and return promptly by February 28th 2017

DIVISION OF PLAY (please check):

- Men's Division \$350
 Senior Men's Division \$350
 Woman's Division \$250
 Boys High School Division \$250
 Boys H.S. (Sophomore & Freshmen) Division \$250
 Boy's Grade School Division \$250
 Biddy Division \$250
 Please Add \$50 late Fee if after 2/28/17

TEAM NAME: _____

TEAM COACH: _____

PHONE NUMBER: (____) _____

EMAIL: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

TEAM SPONSOR or CHURCH AFFILIATION:

**RETURN COMPLETED APPLICATION AND ENTRY FEE AND MAKE
CHECKS PAYABLE TO:**

**Ahepa Bone Marrow Donor Registry
c/o John Venetos M.D,
6520 Tower Circle Drive
Lincolnwood, Illinois, 60712**

Entrance fee is 100% Tax Deductible Non-for-Profit Organization

- **Entrance Fee due on 2/28/17**
- **Please Add \$50 late Fee after 2/28/17**
- **Final Deadline Saturday 3/4/17 6pm @ Seeding Event**