Registration for Basketball Skill Development Clinic July 25-27, 2007

Name: _____

Parents Name: _____

Position: _____

Age: _____

Experience: _____

School: _____

Address: _____

Telephone: _____

Cell: _____

Email: _____

Mail the registration form to the following address:
345 Phillips Drive, Fayetteville, GA 30214 or email the information to skills@tasm.org
Please make checks to the amount of $199 payable to TASM Global Solutions.