2015

AAU CENTRAL SUPER-REGIONALS

The dates and locations for the 2015 Boys Super Regional Tournaments are:

1. **March 21-22: 2nd, 3rd, 4th, 5th, 6th, 7th & 8th Grade Boys Only @ Joy Of The Game - Deerfield, IL.**

2. **May 8-9: 9th, 10th & 11th Grade Boys Only @ Joy Of The Game - Deerfield, IL. (Friday & Saturday Only)**

3. **May 30-May 31: 2nd, 3rd, 4th, 5th, 6th, 7th, 8th, 9th, 10th, 11th Grade Boys @ Joy Of The Game - Deerfield, IL. & Waukegan Fieldhouse**

- **These events are sanctioned by the Amateur Athletic Union of the U.S., Inc.**
- **All participants must have a current AAU membership.**
- **AAU membership may not be included as part of the entry fee to the event.**
- **AAU membership must be obtained before the competition begins except where the event operator has a laptop available with an internet connect. Participants are encouraged to visit the AAU web site www.aausports.org to obtain their membership.**

The tournament fee is $385.00
This is in addition to the team, player and coach membership fees.
Please make tournament fees payable and mail to:
BBall Dreams Attn: Brian Davis
7291 Clem Dr., Gurnee, IL. 60031
For More Information visit www.centralillinoisaau.org or email info@centralillinoisaau.org or call 847-922-6228 or 847-456-2617

TOURNAMENT ENTRY FORM

2015 AAU National Boys' Basketball
Central Super-Regional Championship

TOURNAMENT DATES (Circle Tournament Dates):

1. **March 22-23: 2nd, 3rd, 4th, 5th, 6th, 7th & 8th Grade Boys Only @ Joy Of The Game - Deerfield, IL.**

2. **May 8-9: 9th, 10th & 11th Grade Boys Only @ Joy Of The Game - Deerfield, IL. (Friday & Saturday Only)**

3. **May 30-May 31: 2nd, 3rd, 4th, 5th, 6th, 7th, 8th, 9th, 10th, 11th Grade Boys @ Joy Of The Game - Deerfield, IL. & Waukegan Fieldhouse**

TEAM NAME: _____

Circle your grade division:

2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th

COACHES CONTACT INFORMATION

Name of Head Coach: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Cell #: _____ **Secondary Contact #:** _____

Email Address: _____

Name Asst Coach/Contact Person: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Cell #: _____ **Secondary Contact #:** _____

Email Address: _____

1. **Please Enter Team Roster using the online system at www.aauboysbasketball.org**
2. **Send ENTRY FORM with $385 Entry Fee by Overnight Mail (Fed-Ex, UPS, USPS, etc.) to:**

   AAU Central – BBall Dreams: 7291 Clem Dr., Gurnee, IL 60031

3. **Please fax a copy of this ENTRY FORM to the AAU CENTRAL at 847-855-2602.**