



CYBO PRESENTS

# Back to School Jam

3 v 3 Tournament



REGISTRATION  
FEE

**\$125**

PER TEAM

BOYS & GIRLS RISING GRADES 5-8

@ COUSLER PARK

1060 Church Rd, York, PA 17404

WHEN:

AUGUST 6

8:00A-6:00P

Rain Date August 13

REGISTRATION DEADLINE:  
JULY 23.

**3 Game Guarantee**

## REGISTRATION INFO:

MAX 5 PERSON ROSTER. Registration includes jersey for each player. Min of 4 teams per division required. All Games Will Be Refereed by PIAA Certified Officials. Individual Trophies to Be Awarded to Champions in Each Division. Majority of Proceeds will go towards CYBO Alumni Scholarship

Visit: [www.CYBOPANTHERS.com](http://www.CYBOPANTHERS.com) for registration form.





# Registration - by July 23, 2022

## Email Completed Form :

CYBOORG21@gmail.com with 3v3 in Subject

*Make Non-Refundable Payment of \$125:  
Cash App: \$cybasketball  
In For Section place team name & gender*

*Checks Payable to "CYBO" can be mailed to  
CYBO 3v3  
PO Box 75, Emigsville, PA 17318  
In Note Section place team name & gender*

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**Team Name**

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**Team Contact**

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**Phone Number**

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**Email Address**

**Gender:**  Male  Female

**Grade (2022 - 2023):**

**Waiver:** Every player and their parent are required to read the following waiver. By signing this registration form, you are acknowledging that your participation in this athletic activity carries risk for physical injury up to and including death as well as risk of property damage. By signing this registration form, you signify that you waive your right to any liability claim arising out of your participation in the Back to School Jam 3v3 tournament. By signing this form, you attest that you waive any claim against Central Youth Basketball Organization, Manchester Township, their agents, volunteers, and/or employees while a participant in the Back to School Jam 3v3 tournament.

## Roster:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Jersey Size:** \_\_\_\_\_

Participant Signature (Parent / Guardian if Under 18 Years Old)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Jersey Size:** \_\_\_\_\_

Participant Signature (Parent / Guardian if Under 18 Years Old)

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_ **DOB:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

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**Phone:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**Jersey Size:** \_\_\_\_\_

Participant Signature (Parent / Guardian if Under 18 Years Old)