

Uncle Charlie's Tournaments

2024 Registration Form

Helping Community Hospice

B/C Event

July 21st-22nd, 2024

Dover, Ohio

Price: \$450

3 Game Guarantee (2 Pool, Single Elim)

Age Groups: •8U •10U •12U •14U •16U •18U

Team Name: _____ Age Group _____

Managers Name: _____

Cell Phone: _____

Email: _____

Checks mailed to: Uncle Charlie's Tournaments

1227 3rd Street NW

New Philadelphia, OH 44663

Make checks payable to: Uncle Charlie's Tournaments

Tournament Director: Shannon Cole

330-340-0784

unclecharliestournaments@gmail.com

Tournament Refund Information:

Checks Payable to: _____

Address: _____

City: _____ State: _____ Zip: _____