



BASKETBALL CHECKLIST

Name of Team: _____ Men _____ Women _____

Name of Team Representative (for Delegates Meeting): _____

Per motion made in Indianapolis, Indiana at 2011 CBAD Delegates Meeting, the flat fee per team is \$350.00.

CBAD

- | | |
|--|-----------------|
| <input type="checkbox"/> CBAD Team Flat Fee
(Team Membership Fee, Team Entry Fee, Players Registration) | \$350.00 |
| <input type="checkbox"/> Performance Forfeit Deposit
(\$100 will be returned after the tournament.) | \$100.00 |

USADB

- | | |
|--|-----------------|
| <input type="checkbox"/> USADB Team Membership Fee
(\$20 per player is no longer used. Just \$100 flat fee for a team.) | \$100.00 |
|--|-----------------|

TOTAL: \$550.00

Write a check payable to CBAD

Mail all forms and check to:

- | | |
|--|---------------------------------|
| 1) CBAD Basketball Checklist | Michelle Mendiola |
| 2) USADB Team Registration Form | CBAD Secretary-Treasurer |
| 3) Code of Ethics/Liability Release & Waiver Form | 10700 S. Artesian |
| 4) Any NEW Player's Audiogram | Chicago, IL 60655 |

*****DEADLINE: FEBRUARY 1, 2012*****