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**Inclusive Zone Basketball Festival**

**Entry Form**

* Teams can be maximum **10** players with 5 on court and up to 5 subs.
* **Date:** 8th November 2019
* **Venue:** Beach Leisure Centre
* **Time:** 10.30-14.00
* **Age:** Primary & Secondary on different courts
* **Cost:** **FREE**

Name of School: ……………………………………………………………………….

Team Name/s: ………………………………………………………………………….

Contact Number: ………………………………………………………………………

Email Address: …………………………………………………………………………..

Number of Teams: ……………………………………………………………………..

Teacher/Parent in charge of team/s: ………………………………………………

Please return completed entry forms to:

Kirsty Smith, [kirsty.smith004@gmail.com](mailto:kirsty.smith004@gmail.com)