

**TEAM MAC, LTD BRIAN DUX INVITATIONAL TOURNAMENT**

**March 23 – March 24, 2024 Cost \$375 Discount for multiple teams!**

**A COPY OF THIS FORM MUST BE RECEIVED BY MARCH 16<sup>th</sup>**

**OR YOUR TEAM WILL NOT BE INCLUDED IN THE TOURNAMENT SCHEDULE (check can follow)**

**YOU MUST HAVE YOUR ROSTER AVAILABLE AT ALL TOURNAMENT GAMES**

[www.teammacstorm.com](http://www.teammacstorm.com)

T-Shirts for Championship Teams

Team Name: \_\_\_\_\_

Age: \_\_\_\_\_ GIRLS / BOYS (Circle one) Level A or B

Head Coach: \_\_\_\_\_

Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_ ZIP \_\_\_\_\_

Email \_\_\_\_\_

Please send this form  
with check payable to:  
TEAM MAC, LTD  
Mail to:  
Tim Schulz  
164 Stonehenge Drive  
Orchard Park, NY 14127

**CELL PHONE FOR TOURNAMENT INFO: This is the number we call for playoff info! cell: \_\_\_\_\_**

I certify that I am the Team coach and/or Team representative for the players on the Team identified and named below (the "Team"). As such, I represent that I have the authority to act on behalf of the Team and its players. I certify that we will indemnify and hold AAU, TEAM MAC, LTD, Timothy C. Schulz, Craig Schulz, Team Mac, LTD coaches, Iroquois Central School District, The Nichols School Villa Maria College, Christian Central Academy, City of Buffalo, Peter Machnica Community Center, Bishop Timon HS, Park School, The Gow School, St. Mary's of Lancaster, Daemen College, Buffalo Tapestry, Tournament referees, and each of their respective officers, directors, owners, employees, agents, representatives and/or volunteers harmless and free from any liability, direct or indirect, resulting from the negligence or intentional or reckless act by me or any one of my Team participants during the Tournament event, including but not limited to games, practices or travel to and from these activities. This is an AAU sanctioned tournament and as such teams are required to have AAU insurance. I certify that the Team participants also understand that this is a recreational activity, that there are risks associated with this activity, and that each participant voluntarily assumes the risk of injury, loss or damage than may result from participation in this tournament.

**I certify that my team has insurance!! Must have it or get AAU Insurance**

Coach's Signature \_\_\_\_\_ Date \_\_\_\_\_