



# Texas Spring Showcase April 25-27, 2008

*“Live” Period for Division 1 Men’s College Basketball Coaches  
to Attend & Watch Players!*

## TOURNAMENT INFORMATION

- ★ Pool play, all teams advance to championship round.
- ★ 3 game guarantee.
- ★ Entry fee is \$350 per team.
- ★ Games played at top facilities in the Dallas/Irving/Ft. Worth area: iad Athletic Complex, City of Irving gyms, University of Texas Arlington.
- ★ Normal high school rules with stop clock on all dead balls .
- ★ Play starts on Friday, April 25 at 6:30pm and ends Sunday, April 27 by 5pm.
- ★ The tournament takes place during a “live period” for men’s college coaches to attend on Saturday and Sunday, April 26-27.
- ★ Trophies awarded to 1st & 2nd place team members in each division.
- ★ Champions of the top bracket in 8U through 14U age divisions receive free entry into the National Youth Basketball Championships in Las Vegas (July 27-31, 2007)!

Registration is \$350 per team. Please note that team participation in the tournament is based on a first come first served basis and a spot is confirmed once full payment is received. *Enter any of our Spring tournaments and get \$50 off any of our Summer Tournaments!*

To register, complete the form below and mail with your cashiers check or money order (*no personal checks*) to:

**Vision Sports, PO Box 5247. Kingwood, TX 77325**

## BOYS DIVISIONS

8U/2nd grade  
through 17U/11th grade\*  
*\*Unsigned Srs allowed  
Boys must meet either age or  
grade qualification for their  
division up until the 17U division  
(age as of 9/1/08)*

## GIRLS DIVISIONS

9U/3rd grade  
through Varsity  
*Girls must meet either age or  
grade qualification for their  
division (age as of 1/1/08)*



**FOR MORE  
INFORMATION  
CALL  
1-800-499-6692**

## TEXAS SPRING SHOWCASE REGISTRATION FORM

Boys Team  Girls Team

Team Name \_\_\_\_\_ Division \_\_\_\_\_

Contact Name \_\_\_\_\_ Coach Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Phones \_\_\_\_\_ C: \_\_\_\_\_

Fax \_\_\_\_\_ E-Mail \_\_\_\_\_

The undersigned being the coach of the team named above, hereby agrees to hold Vision Sports, the officers and directors faultless in the event of injury or other harm occurring to the team’s players during the participation in all tournament events. Coach assures the tournament that adequate medical insurance is available and if necessary will be responsible for any medical expenses.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please note that your team is not confirmed in the tournament until full payment is received. Make cashiers checks or money orders (NO PERSONAL CHECKS) payable to “Vision Sports” and mail to PO Box 5247, Kingwood, TX 77325. Entry Fee is \$350 per team.

*Please note: No refunds will be issued if you cancel registration.*