

2006
FULLCOURT PRESS
San Gabriel Valley Spring Showcase
presented by Pangos

Thursday June 15, 2006
Don Bosco HS (Rosemead CA)
1151 San Gabriel Blvd., Rosemead CA 91770

INVITATION-ONLY EVENT

Participation Fee: \$50.00

Limited to 60 top SGV HS underclass players

SGV's #1 spring exposure event provides all participating players an opportunity to demonstrate their skills to all the NCAA Division II, III, NAIA and JUCO coaches, scouts and media expected to attend.

**** Play Top SGV Competition****

****Get Evaluated by the West Coast's and the Nation's Top Scouts
Like Dinos Trigonis (*Fullcourt Press & Hoop Scoop*) and
Gerry Freitas (*Hoop Review*)**

****Each Player Plays in One (1) Showcase Game**

**** Each Game Videotaped by C-Sportsonline.net**

****All Players Included in Special Fullcourt Press Report**

**** Everyone Receives Fullcourt Press SGV Showcase Uniform Top**

6:00pm Freshman Game
7:00pm Sophomore Game ** 8:00pm Junior Game

TO ACCEPT THIS INVITATION
FILL-OUT FORM and MAIL IT TO THE ADDRESS ON FORM
OR CALL (909) 282-5039 FOR MORE INFORMATION
BECAUSE SPACE IS LIMITED

www.fullctpress.net

2006 Fullcourt Press SGV Spring Showcase

PLAYER INFORMATION FORM

(please print)

Name _____ School _____

Home Address _____

City _____ Zip Code _____

Phone () _____ e-mail _____

Grade 2005-06 _____ Height _____ Weight _____

Parent/Guardian _____

Please Mail **\$50.00** Check (Make Checks Payable to "Fullcourt Press") and
Completed Form to:

Fullcourt Press, 3122 Theresa Street #1, Long Beach CA 90814

HEALTH AND BEHAVIOR GUIDELINES AND WAIVER OF LIABILITY

HEALTH INSURANCE CO. _____

Policy No. _____ Group No. _____

I understand that any Fullcourt Press SGV Spring Showcase (FPSGVSS) participant who does not abide by the rules, regulations and policies established by the (FPSGVSS) is subject to dismissal without reimbursement or recourse and I hereby waive and release the FPSGVSS and Don Bosco High School (WHS) from any and all liability for any injury or illnesses while participating in the camp. I hereby authorize the directors of the FPSGVSS and DBHS to act according to their best judgment in any emergency if I cannot be contacted. I understand that each camp participant is required to have their own medical and accident insurance. I also understand that the FPSGVSS retains the rights to use for publicity and advertisements purposes, photographs of camp participants.

SIGNATURE OF PARENT OR GUARDIAN

WWW.FULLCTPRESS.NET