
Amateur Basketball, Inc

Box 158

Minot, North Dakota 58702

TO: Team Managers, Directors, and Recreation Depts.

FROM: Jim Collins, Ex. Secy. NDABI

RE: 2009-2010 Team Registration

Enclosed please find the material and information necessary to register your team(s) for the 2009-2010. Again this year we will be using the 3-day format. Deadline to Register teams is Feb. 20, 2010. Teams would have until March 1, 2010 to drop out if they need to do so. Cost is \$35.00 per team registration fee and \$90.00 per team State Entry fee --total of \$125.00 per team. Class A Division teams \$35.00 registration fee and \$105.00 Tourney fee--Total \$140.00 per team. These are the same as last years fees. Again this year teams that register as Commercial 2 and Recreation teams will be placed in one division for opening round games. The winners of this round will make up the Comm. 2 division and the losers of this round will make up the recreation Division. This makes both Divisions, Championship Divisions with no consolation games.

The Women's Division will be split into an Upper and Lower Division for State Tourney Play.

This year we are trying to start a 50yr. Old and over Division of play in the men's program--PLAYERS IN THIS DIVISION MUST BE 50 YEARS OF AGE BY Dec. 31 of the current season. ROSTERS WILL BE OPEN ON A STATE WIDE BASIS. DISTRICT LINES DO NOT COUNT. PICK-UP OR POOL PLAYERS AT STATE TOURNEY TIME MAY NOT BE ON ANOTHER 50 AND OVER STATE ROSTER. PLAYERS IN THIS DIVISION MAY PLAY ON ANOTHER STATE ROSTER IN A DIFFERENT DIVISION IF THEY CHOOSE.

Any questions on registrations or player eligibility or Team eligibility should be sent to:

Jim Collins Ex. Secy. NDABI Home (701)839-5263
Box 158 Cell (701)720-5263

Minot, N. Dak. 58702 FAX. (701) 839-7318

North Dakota Amateur Basketball Incorporated
TEAM ROSTER – Division _____
Year: 2009-2010

City or Town _____

Team _____

Team Manager _____ Mgr.'s Address _____

Manager's Phone #'s _____ / _____ Email Address _____

Division: Men's A B Old Pro Comm 1 Comm 2 Rec 50+ Women's

I, and all my executors, administrators hereby waive and release any and all rights and claims against the North Dakota Amateur Basketball Organization such as injuries, which may result while participating in the association play.

Player's Name Signature Town/City Ht. Birth Age

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

Substitutions or Transfers, or "Pick-up Players"

1. _____

2. _____

Return to your District or Local Commissioner. Local Teams Please make check payable to **MRC**, All Other Teams Make Checks to **NDABI**.

Regardless of when league play starts, submit no later than **February 12, 2010**. The undersigned officials certify the above named players are eligible under the Incorporated Rules and Regulations. _____ **Signature/Team Manager or Captain**