HAVE A HEART
3 ON 3 BASKETBALL TOURNAMENT

The Ella Rose Solak Memorial Scholarship Fundraiser

Event: 6^{th} Annual 3 on 3 Basketball Tournament

When: Saturday, March 28, 2015
Sign in for tournament at 8:00am *Starts at 9:00*

Where: Lowellville High School, 52 Rocket Place, Lowellville, Ohio 44436

Entry Fee: $60.00 per team (consisting of 3 or 4 players) - registration fee includes a t-shirt for each team member and lunch (pizza, chips and drink)

Tournament Awards: A medal will be awarded for each individual of the winning team for each age group. *Winners must be present*

Age Groups: *Subject to change*
Female: 5^{th} & 6^{th} grade, 7^{th} & 8^{th}, 9^{th} – 12^{th}, 19 years and older
Male: 4^{th} grade, 5^{th} & 6^{th}, 7^{th} & 8^{th}, 9^{th} & 10^{th}, 11 & 12^{th}, 19 years and older

This tournament is held in honor of Ella Rose Solak. Ella was a baby in our community who lost her life to hypoplastic right heart syndrome when she was just 20 months old. Ella went through several heart surgeries before she lost her life to this heart defect on March 23, 2010. All the proceeds received from this event will be placed in the Ella Rose Solak Memorial Scholarship Fund at Huntington Bank, and a graduating senior from Lowellville High School will be awarded with a scholarship in Ella’s name at the senior banquet held in May.
Make checks payable to:    Have A Heart
Mail check* and complete registration to:    Have A Heart
5987 Badal Dr.

*Do not mail cash – only checks will be accepted.
Lowellville, OH 44436

Application deadline is March 10, 2015
Please feel free to call or e-mail us with any questions or concerns
haveaheart4ella@hotmail.com or 330-536-8033 or 330-501-4327

Complete registration for each player:
TEAM NAME: ______________________

Age Groups: *Subject to change* (CIRCLE ONE)
Female: 5th & 6th grade, 7th & 8th, 9th - 12th, 19 years and older
Male: 4th grade, 5th & 6th, 7th & 8th, 9th & 10th, 11 & 12th, 19 years and older

1. First Name: __________________ Last Name: ________________
   Address: ____________________ Phone #: __________________
   City: ________________________ Shirt Size: YS YM YL S M L XL XXL
   E-mail: ______________________
   SIGNATURE (parent if under 18 yrs. old) ________________________

2. First Name: __________________ Last Name: ________________
   Address: ____________________ Phone #: __________________
   City: ________________________ Shirt Size: YS YM YL S M L XL XXL
   E-mail: ______________________
   SIGNATURE (parent if under 18 yrs. old) ________________________

3. First Name: __________________ Last Name: ________________
   Address: ____________________ Phone #: __________________
   City: ________________________ Shirt Size: YS YM YL S M L XL XXL
   E-mail: ______________________
   SIGNATURE (parent if under 18 yrs. old) ________________________

4. First Name: __________________ Last Name: ________________
   Address: ____________________ Phone #: __________________
   City: ________________________ Shirt Size: YS YM YL S M L XL XXL
   E-mail: ______________________
   SIGNATURE (parent if under 18 yrs. old) ________________________

RELEASE: I understand and am aware of the hazards that may result due to my participation in the tournament. I should not be physically involved unless I am medically able and properly prepared. I agree to abide by all the rules and regulations set forth by the Have A Heart Committee. I also assume injuries including but not limited to falls and contact with other participants. Also, I give my permission to be photographed and/or videotaped. After reading and considering the facts of the waiver involving my entry in the tournament, neither myself or anyone entitled to act on my behalf, waive and release the organizers of the Have A Heart Fundraiser, Lowellville Schools, the Village of Lowellville, the Solak Family, and sponsors from all claims or liabilities of any kind arising from my participation in this event.