



## BTG 5 v5 FLAG FOOTBALL TOURNAMENT- JAN. 29<sup>th</sup> & 30<sup>th</sup>

**Fall Tournament Location:** Shirley Winston Park (5025 Steam Mill Rd., Columbus, GA 31907)

**Times:** Games played on Saturday and Sunday from 9a-6p (Jan. 29<sup>th</sup>, 30<sup>th</sup>)

**Register by Mail:** Beyond the Game Sports attn: Jeff Gonos@ 400 4<sup>th</sup> St., Columbus, GA 31901

Register on-line at [www.btgsports.net](http://www.btgsports.net)

PLEASE PRINT & MAIL OR FAX THIS FORM.

CONFIRMATION for FAXES: We will contact you by email or phone within 1 business day to let you know we received your fax. If we do not contact you, please call the office as we may have not received it.

Registration Type: **Team- \$250.00 (Ten players max. \$35 for each additional individual)**

Total Payment Amount: \_\_\_\_\_

\* First Name \_\_\_\_\_

\* Last Name \_\_\_\_\_

**Contact Information:**

\* Email Address \_\_\_\_\_

\* Day Phone \_\_\_\_\_

\* Billing Address \_\_\_\_\_

\* City: \_\_\_\_\_ \* State: \_\_\_\_\_ \* Zip Code \_\_\_\_\_

Please attach check and mail to:

Beyond The Game  
400 4<sup>th</sup> Street  
Columbus, GA 31901  
Or  
Fax to 706-478-0434

Questions? Call 706-393-8181 or email [btgsports@gmail.com](mailto:btgsports@gmail.com)

## ROSTER FOR TEAMS OR SMALL GROUPS

Captain's Name \_\_\_\_\_ Captain's Phone \_\_\_\_\_

Team Name? \_\_\_\_\_

Team Color (put down top 3 choices)? 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

### Team or Small Group Roster

<b>Name</b>	<b>Email</b>	<b>Phone</b>	<b>T-shirt size</b>
<b>1</b>			
<b>2</b>			
<b>3</b>			
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