

School _____
Address: _____
City: _____ State: _____ Zip Code _____
Telephone: _____ Fax # _____ E-Mail: _____
Head Coach: _____ Phone #(Work) _____ Ext: _____
Athletic Director: _____ Phone: #(work) _____ Ext: _____
Home Phone (Optional) _____ Email _____

Please check one of the following below:

- YES, we are interested in participating in the ACHS Invitational Boys Basketball
February 2012
- NO, We will not be able to participate in the Battle By The Bay Classic

COMMENTS: _____

Day that you would prefer to play (No guarantees) Fri. _____ Sat. _____ Sun. _____
Completing the survey does not guarantee an invitation.

Signature: _____ Position: _____

Please return the completed form to :

William C. Steele
Battle By The Bay Selection Committee
628 South First Avenue
Galloway, New Jersey 08205
Phone (609) 748-9717 Cell Phone (609) 412-1128
Fax 609-748-6166

Additional comments can be put on the back