

2020 FIBERMAX CAPROCK CLASSIC
Lubbock Caprock Chapter of AMBUCS
The largest high school basketball tournament in the nation
www.caprockclassic.com

2020 FIBERMAX CAPROCK CLASSIC - PARTICIPATION CONTRACT

School Name _____

_____ **Boys** _____ **Girls**

Address _____

School Classification (UIL) _____

City,State,Zip _____

-----OR-----
School Enrollment (TAPS) _____

____, Yes, we contractually agree to play in the **FIBERMAX CAPROCK CLASSIC: December 29-31, 2020**

____, No, we are unable to attend.

The undersigned hereby represents and warrants that it has the full capacity and authority to enter into, execute, deliver and perform this contract, and that such execution, delivery and performance will be valid and binding upon the aforementioned school regardless of any coaching or athletic director changes. The undersigned acknowledges and AMBUCS is relying upon this representation in the preparation of its tournament. Breach of this contract will result in severe and irreparable harm to Caprock AMBUCS. **As a result, failure to perform will result in a \$1,000 withdrawal fee payable to AMBUCS. The withdrawal fee will be incurred after school fails to attend scheduled game(s) OR if school communicates before tournament that the team will be unable to attend the tournament. THERE IS NO ENTRY FEE.**

The undersigned does hereby bind the aforementioned school to perform this contract; however, teams are not confirmed until acknowledged in writing by Caprock AMBUCS.

This participation contract also permits the names of schools, pictures of games etc for marketing and promotional purposes.

Coach Name: _____

RETURN TO: Caprockcontract@gmail.com

Today's Date: _____

In an effort to minimize miscommunications, we humbly request submissions via email only. If this is an issue, please contact us.

Coach's Signature: _____

Athletic Director's Signature: _____

School Superintendent's Signature: _____

(ALL signatures required for completion of contract)

**EACH TEAM IS GUARANTEED 4 GAMES.
TEAMS ARE NOT GUARANTEED BRACKET POSITION, PLACEMENT OR LEVEL OF COMPETITION.**

**FOR TRAVELING TEAMS, WE REQUEST YOU AND YOUR FANS STAY AT ONE OF OUR HOST HOTELS.
HOTEL LINK CAN BE FOUND ON OUR WEBSITE OF WWW.CAPROCKCLASSIC.COM**

Please help us with the correct communication information below:

Coach Cell Phone: _____

Coach E-mail Address (PRINT CLEARLY): _____

Athletic Director's E-mail Address (PRINT CLEARLY): _____

WE WILL CONFIRM RECEIPT OF YOUR COMPLETED CONTRACT. IF YOU HAVE NOT RECEIVED YOUR E-MAIL CONFIRMATION WITHIN 10 DAYS FROM YOUR SUBMISSION, PLEASE CONTACT US AT 789-6491 or 787-6540 or 939-3629 (All 806 area codes)