



DIVISION *of*
STUDENT AFFAIRS

Department of Campus Life

BASKETBALL TOURNAMENT
TEAM SIGN-UP SHEET

TEAM NAME: _____

TEAM CONTACT NAME: _____

TEAM CONTACT WHATSAPP: _____

#	PLAYER NAME	EMAIL
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

***Teams must have a minimum of 5 players.**

***Contact Coach Khaled at X9372 or Email: sports@pmu.edu.sa**