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**ENTRY FORM**

**International Indoor Championship**

**March 4<sup>th</sup> & 5<sup>th</sup>, 2017**

Team Name: \_\_\_\_\_

Team Colors: \_\_\_\_\_

Team Contact: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

**DIVISION: (Circle One)**

- **Women**
  
- **Men**
  
- **University**

Please mail Entry Form and Fee of **\$700.00 US**, payable to:

**BAHF, Inc.  
PO Box 428  
Baldwin, NY 11510**

**ENTRY DEADLINE – JANUARY 15, 2017**