

# ***Texas Elite Classic***

**This is your team's intent to participate form. Please fill out and return.**

Please e-mail this form to [houstonelite\\_aau@hotmail.com](mailto:houstonelite_aau@hotmail.com) or

Pay your full payment (\$400.00) online at [www.houstonelite.com](http://www.houstonelite.com) or

Mail your deposit of \$100.00 to:

Houston Elite

PO Box 451721

Houston, Texas 77245

Make checks payable to: Houston Elite

Team name: \_\_\_\_\_

Coaches Name: \_\_\_\_\_ Approval # \_\_\_\_\_

Coach Name: \_\_\_\_\_ Approval # \_\_\_\_\_

Statistician: \_\_\_\_\_ Approval # \_\_\_\_\_

Email address: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_

Amount paid \$ \_\_\_\_\_ Amount owe \$ \_\_\_\_\_



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