BCAM **<u>BOYS'</u>** TOP SHOOTERS – 3-POINT SHOOTING

INDIVIDUAL <u>AND</u> TEAM – School Year 20_____-20_____

COACH: Please follow directions. Fill in the form below for an individual and/or your team. A player must have attempted 50 3-pointers to be eligible. Questions: Contact Mark Bray at <u>mark.bray@uticak12.org</u>

VAR. COACH'S NAME______________________________ SCHOOL_______________________ PHONE and/or EMAIL_______________________________

MALE PLAYER'S NAME if individual____________________________________ (Print Clearly)

DATE	OPPONENT	INDIVIDUAL 3-PT MADE	INDIVIDUAL 3-PT ATTEMPTED	TEAM 3-PT MADE	TEAM 3-PT ATTEMPTED
	TOTALS:				

MAIL TO: Mark Bray, Top Shooters, 2417 Chesley Dr, Sterling Heights, MI 48310

DEADLINE: April 10 (*Late entries will not be considered!)* 1/09