TEAM NAME:______________________________

Team name will be engraved on each name plate if provided. Engravings can include numbers and punctuations. Trophy styles shown may be subject to change due to availability.

AZPX-SE

BASKETBALL

WINTER 2021

TEAM TROPHY FORM

List all players on the team below and mark their trophy choice.

2" Medal

5" Small

6-1/4" Trophy

Player's Full Name **Required**	Name to be Engraved (If left blank, Full Name will be used)	Medal $6	Small $9	Trophy $11	TOTAL

If submitted after **Thursday, February 4**, include **$10 Late Fee** ______

GRAND TOTAL $ ______

All orders must be received WITH PAYMENT no later than 5:00pm on Thursday, February 4

Orders received late must include $10 late fee.

IMPORTANT

- Use this order form for the entire team.
- NO multiple payments accepted.
- Make checks out to All Year Sports.
- Returned checks subject to $25 fee.
- Orders NOT accepted without authorizing signature.
- Late fee added to total of entire order.
- Late orders are subject to availability and style.

ADD PLAYERS

- **OPTION 1** Submit new player by ordering online.
- **OPTION 2** Visit nysonline.net, FIND YOUR LEAGUE.
- Print out a blank trophy form.
- Write and circle "ADD-ON" next to the new player.

ORDER SUBMISSION

CREDIT CARD:

- **ONLINE** AllYearSports.net

CASH, CHECK or MONEY ORDER:

- **MAIL** AYS Trophy
  8550 N 91st Avenue #49
  Peoria, AZ 85345
- **NO CALL-IN ORDERS.**
- **Taking a photo of your trophy form via cell phone is not an accepted format for submission.**

PHOTO / TROPHY PICKUP

Choose ONE team representative to pick up photos and trophies for the whole team.

Week Before Last Game

4:00 to 6:00 PM

NYS Mesa/Gilbert Office

218 W. Hampton #8 | Mesa

CONTACT / PAYMENT INFORMATION

This form is best used to submit with Cash or Check payments only.

CREDIT CARD ORDERS: Please visit our NEW convenient Trophy Online Ordering site: **Allyearsports.net**

Full Name ______________________________

Mailing Address ______________________________

City ____________________ State ______ Zip ____________ Phone #1 ____________________

Email ______________________________ Phone #2 ____________________

OFFICE USE

Cash $ ____________ Check# ____________

CC Auth# ____________ Date Ran ____________

Received by ____________ Date ____________

Entered by ____________ Date ____________

Accounting ____________ Date ____________