



You are cordially invited to the 2009 Nisei Week Hoops Basketball Tournament!

Basketball has become a big part of life for many Japanese Americans. It is a fun activity that a lot of families participate in, but it can become so much more if we were playing for a purpose. The goal of the Nisei Week Hoops Basketball Tournament is to have fun while promoting cultural awareness and preservation. With your participation, sponsorships, and the help of numerous volunteers devoting their time and energy toward this tournament, we can continue learning and educating people about the Japanese and Japanese American culture through Nisei Week. Nisei Week not only gives individuals opportunities to explore their roots and the importance of their heritage, but also invites others in the community to participate and learn more about our beautiful culture. We thank you for your support and contributions toward our tournament and the Nisei Week Foundation.

JOIN US THIS YEAR FOR OUR 1st ANNUAL KIDS FUNDAMENTALS CLINIC!

Date: June 27, 2009
Location: Whittier High School
Time: 8:30am - 10:00am
Age(s): 7 years - 17 years (age groups will be broken up)

Fees: \$10 per player (prior to May 29th)
\$15 per player (after May 29th)

**** Limited to the first 60 completed applications ****

Payment and applications can be submitted online through <http://www.niseiweek.org> or send your completed roster along with entry fee* to:

Nisei Week Hoops
C/O Hoops Committee: Kids Clinic
707 E. Temple St.
Los Angeles, CA 90012

*Checks payable to *Nisei Week Foundation*
For more information contact us at niseiweekhoops@yahoo.com

**2009 NISEI WEEK HOOPS BASKETBALL TOURNAMENT
WEBSITE ADVERTISEMENT APPLICATION**

- Ad Rates:** Top Banner Ad (1) \$ 1,000.00
 Exclusive Ad Display (2) \$ 500.00
 Rotating Display (16) \$ 125.00
 Community Display (16) \$ 75.00
 Friends of NW Hoops \$ 25.00
 Donation \$ _____

Graphic Art Support Is Available Create Your Ad or Artwork Scanning at a negotiated rate.

Total: \$ _____

IMPORTANT: ALL ADS MUST BE SUBMITTED THROUGH EMAIL (DAWNKIKO@GMAIL.COM) IN RGB, JPEG OR GIF FORMAT, 72dpi, NO LARGER THAN 120KB.
* FOR ASSISTANCE PLEASE CONTACT KIKO CHENG AT DAWNKIKO@GMAIL.COM

Payment: Cash Check # _____ Money Order

Name: _____

Company/Organization: _____

Address: _____

Phone Number: _____

Nisei Week Hoops Contact Person: _____

Please Make Checks Payable to: Nisei Week Foundation

Mail Form and Payment to:

**NW Hoops Basketball Tournament
C/O Advertisement Dept.
707 E. Temple Street
Los Angeles, CA 90012**

THANK YOU VERY MUCH FOR YOUR CONSIDERATION AND SUPPORT!!!

2009 NISEI WEEK HOOPS KIDS CLINIC

Player Name: _____

Age: _____

Parent(s): _____ Email: _____

Address: _____

Phone: Home _____ Mobile: _____

Alternate Contact: _____ Phone: _____

Waiver

I, _____, release the Nisei Week Foundation from all responsibilities of any nature incurred while participating in any Nisei Week Foundation activities. We understand that medical insurance is our personal responsibility.

Signature: _____ Date: _____

Parents must sign and return this waiver for their child to participate.

Tournament Use Only

Date Received: _____ Check#: _____