

# ***STORM CLASSIC***

## ***Grand Rapids, MI April 14-16***

**Hotel :**      **Courtyard Grand Rapids Airport**  
4741 28<sup>th</sup> Street SE, Grand Rapids, MI      (616) 954-0500

**EACH PLAYER MUST HAVE THE FOLLOWING ITEMS:**  
**Spending Money for Meals, etc Health Insurance Information (phone screen shot)**

**Team Fee \$55 per player**

**Hotel Fee \$85 per player**

**Departure:**      **T.B.D (when game schedule has been made available)**

**Tournament Info:**      [Storm Classic](http://www.StormClassic.net) {<http://www.StormClassic.net>}

**SCHEDULE: {NOT PUBLISHED AS OF 3/26/2025}**

**--- Complete if traveling with Team Transportation -----**

**Name:** \_\_\_\_\_ has my permission to travel to Ny2LA Event in **Grand Rapids, MI April 11-13**. I authorize **R.E.A.C.H Youth Programs (Staff)** as temporary guardian to obtain any medical or surgical care deemed necessary in the case of an emergency. I grant permission to for the emergency room staff to perform any necessary medical treatment in the event of an accident, illness, or life-threatening emergency.

Address: \_\_\_\_\_ City: \_\_\_\_\_ Phone: \_\_\_\_\_

Age: \_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Any Special Medical Attention/Medication/Disabilities/Allergies:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**www.ReachLegends.com**  
**(313) 355-2335**  
**IG: @ReachLegends**