



OFFICIAL TEAM REGISTRATION FORM

2020-2021 SEASON

Print and fill out ALL information on the front and back of the form, and print TWO copies.
The cost of registration is \$60.00 per player.

TEAM NAME: _____

PREV TEAM NAME: _____

TEAM VENUE: _____

Name and Contact: _____

Address: _____

Phone Number: _____

*please make a note for any venues with events that interfere with league play night.

Please provide name, address and phone number for Captain AND Co-captain.
All other team members, please provide name and phone number ONLY on the back of the form.

CAPTAIN: _____

ADDRESS: _____

PHONE #: _____

CO-CAPTAIN: _____

ADDRESS: _____

PHONE #: _____

DIVISION REQUESTED: _____

NOTE: All entries **MUST** be received on or before August 4th, 2020
along with **FULL** payment and your completed registration form.
You must have at least four (4) players to register a team to play in the league.

Comments: _____

\$ PAID: CASH _____ CHEQUE _____ CHEQUE NUMBER _____ INITIALS _____ DATE _____ (executive use)

Remaining team members names and phone numbers:

MEMBER #1 NAME _____

PHONE # _____

MEMBER #2 NAME _____

PHONE # _____

MEMBER #3 NAME _____

PHONE # _____

MEMBER #4 NAME _____

PHONE # _____

MEMBER #5 NAME _____

PHONE # _____

MEMBER #6 NAME _____

PHONE # _____