

TEAM NAME _____

TEAM MEMBER 1

FULL NAME _____

PHONE _____ CITY/STATE _____

EMERGENCY CONTACT _____

EMAIL _____

I have reviewed the City's Rules and Regulations for this league ____ YES ____ NO

SIGNATURE _____

TEAM MEMBER 2

FULL NAME _____

PHONE _____ CITY/STATE _____

EMERGENCY CONTACT _____

EMAIL _____

I have reviewed the City's Rules and Regulations for this league ____ YES ____ NO

SIGNATURE _____

ALTERNATE 1 (OPTIONAL)

FULL NAME _____

PHONE _____ CITY/STATE _____

ALTERNATE 2 (OPTIONAL)

FULL NAME _____

PHONE _____ CITY/STATE _____