

Registration Form for 2016:

Circle: WINTER SPRING SUMMER FALL

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

AGE GROUP/TEAM: \_\_\_\_\_

TELEPHONE: (HOME) / (CELL) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

PARENT OR GUARDIAN NAME: \_\_\_\_\_

INTERESTED IN COACHING: YES \_\_\_\_\_ NO \_\_\_\_\_

SHIRT SIZE:            YOUTH            S    M    L    XL            NUMBER: \_\_\_\_\_

                                 ADULT:            S    M    L    XL    XXL

METHOD OF PAYMENT:            CASH            CREDIT/DEBIT CARD

Please tell us your GOOD DAYS AND TIMES OF THE WEEK: \_\_\_\_\_

Please tell us your BAD DAYS AND TIMES OF THE WEEK: \_\_\_\_\_

OTHER NOTES:

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