

TEAM NAME: \_\_\_\_\_ CITY: \_\_\_\_\_

Coach: \_\_\_\_\_ Assistant: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

PLAYER NAME	BIRTHDAY	SEX	GRADE	SELECT/CLUB

\_\_\_\_\_  
HEAD COACH – SIGNATURE & CELL PHONE

\_\_\_\_\_  
LEAGUE PRESIDENT – SIGNATURE & CELL PHONE