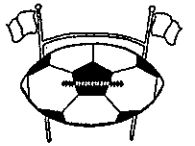




# TEAM REGISTRATION FORM



TEAM NAME: \_\_\_\_\_ LEAGUE: \_\_\_\_\_

LEVEL(✓): A \_\_\_\_\_ B \_\_\_\_\_ C \_\_\_\_\_ D \_\_\_\_\_ MAS \_\_\_\_\_  
REC \_\_\_\_\_ WOM A \_\_\_\_\_ WOM B \_\_\_\_\_ MINOR \_\_\_\_\_ FALL/WIN \_\_\_\_\_

	last name	first name	street	city	postal code	email	telephone	date of birth			**signature
								D	M	Y	
1											
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3											
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20											
21											
22											
<b>MANAGER:</b>											
<b>COACH:</b>											
<b>ASST. COACH:</b>											
<b>TRAINER:</b>											

**\*\*VERY IMPORTANT: IF A PLAYER DOES NOT SIGN, HE/SHE IS NOT CONSIDERED REGISTERED (Exception: Minor's Division)**