## Free Team Registration Form

Team Details			
Team Name:			
Event:			_
Contact Information			
Email:			
Phone:			
Player Roster			
Player Name	Date of Birth	Contact Number	Position
<i>N</i> aiver			
By signing below, I a	acknowledge that	all participants are p	hysically fit t
participate and relea	se the organizers	from liability.	
Coach/Captain Sign	ature:		
Date:			