



Parks and Recreation Department

Team Registration Form

Sport/Activity: _____

Sponsor/Team Name: _____

Managers Name: _____

Physical Address: _____

Mailing Address: _____

Phones: Hm) _____ Wk) _____

Cell) _____

Email: _____

Office Use

Sponsor fee: _____ Team fee: _____

CC Name: _____ CC#: _____

Expiration date: _____ Code: _____

Cash: _____ Check #: _____

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