

2018-2019 TEAM REGISTRATION FORM FOR LEAGUES AT GAME TIME GYM II

This form must accompany Individual Registration Forms for all players on your team. All forms are to be turned in as a group at the same time. Incomplete forms will not be accepted. One check for the whole team is preferred but separate checks will be accepted.

INDICATE THE SESSION/LEVEL/LEAGUE/GENDER YOU ARE REGISTERING FOR.

Soccer: Boys / Girls	Basketball: Boys / Girls	Flag Football	Volleyball
Age: _____	Grade _____	Grade _____	Division _____
Session # _____	Session # _____	Session # _____	Session _____
Recreational or Competitive			

Include Individual Registration Forms With This Form

TEAM NAME

TEAM COACH

TELEPHONE

HOME

WORK

CELL

ADDRESS

CITY

STATE

ZIP

EMAIL ADDRESS

TEAM MEMBERS

JERSEY SIZE

Players Name: (Please Print)

- | | | |
|-----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |
| 7. | _____ | _____ |
| 8. | _____ | _____ |
| 9. | _____ | _____ |
| 10. | _____ | _____ |
| 11. | _____ | _____ |
| 12. | _____ | _____ |

