

# 2011-2012 WOMEN'S LEAGUE

DATE \_\_\_\_\_

TEAM NAME \_\_\_\_\_ DIVISION \_\_\_\_\_

CONTACT NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL ADDRESS (MUST INCLUDE!) \_\_\_\_\_

**COST- \$ 900/TEAM INCLUDES PLAYOFFS & REF FEES) \* 8 GAMES  
MANDATORY SHIN GUARDS & INDOOR SHOES!**

## ROSTER

	PLAYER NAME	DATE OF BIRTH
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

**PAYMENT**    \_\_ CASH    \_\_\_ CHECK    \_\_\_ CREDIT CARD\* (ADD 3% PROCESSING CHARGE)

DRIVERS LICENSE # \_\_\_\_\_

CREDIT CARD (MC/VISA/AMEX/DISCOVER) \_\_\_\_\_

NAME AS IT APPEARS ON CREDIT CARD \_\_\_\_\_

CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_