

## 202**2** FALL POOL



## **REGISTRATION**

Please Print Clearly, and include address, phone number and email address.  Name of Bar Sponsoring your Team	
Team Name:	
	be the name of your team on standings. You don't need to pick one now, but if you don't, the name will be your bar's of the captain. After leagues have begun, names can not be changed.
Captain's Name	
Captain's Address	·
City:	State: Zip:
Home	
Phone #'s Work	Email Address:
(Both phone numbe	rs are required unless you use a cell phone that you answer during day hours.) If you have email that you check regularly please include that information also.
	ast year? (even if members have changed)  Yes  No
Team Name:(Las	, - <u></u>
<u>LE/</u> Tuesday	AGUE (Please check one. (You must fill out separate form for each night you plan to play):  Wednesday Thursday
4-Man Team	
	Divisions B,C,D, E
PLEASE LIST BELOW THE NAMES OF ALL YOUR PLAYERS. YOU MUST LIST YOUR FOUR REGULAR PLAYERS AND AT LEAST ONE	
SUB. You must include addresses for every player and also shirt sizes.	
CAPTAIN	Captain Information- if you filled out the top of the form you do not need to duplicate the info for this player!
*18	FORMATION FOR THIS PLAYER IS ALREADY FILLED OUT*
	SEE ABOVE
PLAYER 2	NAME:
ADDRESS	
EMAIL	
PHONE	
	Lucy -
PLAYER 3	NAME:
ADDRESS	
EMAIL PHONE	
PLAYER 4	NAME:
ADDRESS	
EMAIL	
PHONE	
CLID	INIAME
SUB	NAME:
ADDRESS EMAIL	
PHONE	