



2022 Fall Dart Registration

South Dakota



Please Print Clearly, and include address and phone number to better assist us.

Name of Bar Sponsoring your Team _____

Team Name: _____

Team Names - This will 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 name and the last name of the captain. **After leagues have begun, names can not be changed.**

Player 1

check box

Captain's Name: _____

Sanction _____

New to dart league? _____

Captain's Address: _____

City: _____

State: _____

Zip: _____

Work/Cell: _____

Phone #'s

Home: _____

E-Mail: _____

(Both phone numbers are required unless you use a cell phone and can answer it during the daytime hours.) These numbers are necessary so we can reach you. If a work number is unavailable, we must have another contact on the team. If you have an email address that you check regularly - please include that information also.

Did your team play last year? (even if members have changed)

☐ Yes

☐ No

Team Name:(Last Years)

Put an X in the box BELOW the league you intend to play

Watertown

Milbank

Castlewood

Goodwin

Hamlin

<u>Tuesday</u> 501	<u>Wednesday</u> 501	<u>Thursday</u> 01/Cricket Combo	<u>Thursday</u> 501	<u>Friday mix</u>		<u>Thursday</u> 501	<u>Friday</u> 501	<u>Thursday</u> 501

PLEASE LIST BELOW THE NAMES OF ALL YOUR PLAYERS. YOU MUST LIST YOUR FOUR REGULAR PLAYERS

You must include players addresses and phone numbers!!

PLAYER 2

NAME: _____

check box

ADDRESS

Sanction

EMAIL

New to dart league?

PHONE

PLAYER 3

NAME: _____

check box

ADDRESS

Sanction

EMAIL

New to dart league?

PHONE

PLAYER 4

NAME: _____

check box

ADDRESS

Sanction

EMAIL

New to dart league?

PHONE

SUB

NAME: _____

check box

ADDRESS

Sanction

EMAIL

New to dart league?

PHONE