

# TEAM INFORMATION SHEET

(PLEASE TYPE OR PRINT CLEARLY)

**RETURNING TEAM, RETURNING TEAM WITH NEW NAME OR NEW TEAM? (Circle One)**

**TEAM NAME:** \_\_\_\_\_ **Requested Div.:** \_\_\_\_\_

Home Jersey Color: \_\_\_\_\_ Alternate Jersey Color: \_\_\_\_\_

Preferred HOME Field: \_\_\_\_\_ Alternate field: \_\_\_\_\_

**SPECIFIC SCHEDULING REQUESTS:**      **9AM GAMES ?**    YES    NO    (Circle One)

Please note any Sundays that you cannot play, preferred playing times, and/or any other conflicts you might have with an ALL Sunday schedule. **NOTE:** There is a fee of \$75 for postponements of Sunday games-MUST BE REQUESTED AT TEAM REGISTRATION.

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**While every effort is made to honor each request, field availability, weather, etc may affect your request.**

**Please mark the two weeknights that are best suited to your team in the event any midweek games are required.**

(1) First Preference (circle one)

(2) Second Preference (circle one)

Mon. Tues. Wed. Thurs. Fri.

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**Captain/Coach:** \_\_\_\_\_ **D.O.B.** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_  
                         Landline or Cell? (circle one)                                Landline or Cell? (circle one)

**ALTERNATE CONTACTS:** Person(s) to contact in the event Capt/Coach cannot be reached:

NAME: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

NAME: \_\_\_\_\_ Primary Phone: \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_