

# West Texas Premiere League Team Registration Form FALL 2008

*This form has active form fields so you can type your information from acrobat reader*

FULL TEAM NAME \_\_\_\_\_

AGE GROUP/GENDER \_\_\_\_\_

COACH \_\_\_\_\_

CONTACT PERSON IS WHERE SCHEDULE AND INFO IS E-MAILED

CONTACT PERSON \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CELL # \_\_\_\_\_

HOME # \_\_\_\_\_

A & D TEAM REPRESENTATIVE (REQUIRED FOR TEAM TO REGISTER)

NAME \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CELL # \_\_\_\_\_

HOME # \_\_\_\_\_