

Team Sign-Up Form "[Click here and type school name]"

TEAM NAME:			

Captains must return forms to Tournament Director before their first match

<u>CAPTAIN</u>	<u>PLAYER</u>	
Name	Name	
Campus Address:	Campus Address:	
Phone:	Phone:	
Major:	Major:	
Year in School	Year in School	
Last 4 digits of SS#	Last 4 digits of SS#	
mm/dd/yy of birth	mm/dd/yy of birth	
Email:		
ID #:	ID #:	
<u>PLAYER</u>	<u>PLAYER</u>	
Name	Name	
Campus Address:	Campus Address:	
Phone:	Phone:	
Major:	Major:	
Year in School	Year in School	
Last 4 digits of SS#	Last 4 digits of SS#	
mm/dd/yy of birth	mm/dd/yy of birth	
Email:	Email:	
ID #:	ID #:	