



TEAM REGISTRATION FORM

Team Name:		Team Captain:	
Address:		Date of Birth:	
Primary Phone:		Alternate Phone:	
E-Mail:			

TEAM ROSTER

(Changes to the Roster will be accepted until March 28th. No changes (additions) will be accepted after that date. Email changes to msoldan@brooks.ca)

	Name	Date of Birth	Phone Number	E-mail
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

**Players must be at least 18 years of age as of March 30, 2019. All Players will be required to sign a waiver prior to playing their first game (waiver forms will be at the tournament venue(s) at the start of the tournament).*

Please submit this form Attn: Megan Soldan by email: Msoldan@brooks.ca, fax: 403-362-4416 or drop off in-person at the JBS Canada Centre (323, 1st St. East, Brooks Alberta)

You will receive a confirmation email when the registration form is received with payment instructions. Payments can be made in-person (cash/debit/credit card/cheque), phone (credit card only) or mail (cheque only). Cheques must be made out to the City of Brooks. **Payments must be received in full by March 15, 2019.**

If you have any questions, please call City of Brooks, Recreation Services at 403-362-3622.

FOR OFFICE USE ONLY			
Date Received:		Staff Initial:	
Date Payment Received:		Staff Initial:	
Payment type:		Cheque No.:	