

Adult Basketball Team Registration Form

COED Sunday 5 on 5

Team Name: _____

Sponsor *(If Applicable) (Will be given Facebook recognition)*: _____

Captain's name: _____

Phone number: _____

Email: _____

Player Name:	Age:	Email
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1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

FEMALE ROSTER PLAYERS

8. _____

9. _____

10. _____

Up to 10 players per roster for 5 on 5 league (WILL BE STRICTLY ENFORCED)

ROSTER CHANGES ALLOWED UP TO PRIOR TO WEEK #2'S GAME

-Register at The Northern Center in person at 7784 Stone School Rd Houghton Lake, MI or through phone/email. By Providing an Email Address, An Invoice will be sent to Captains. Full Registration Payment Due before first game. Ref Fees due weekly. Forms may also be accessed at www.coachvick.net. For Questions or to Register, call (989)-202-4888 or coachmvick@gmail.com