

TEAM INFORMATION SHEET

I EAM NAME:	
LEAGUE:	
TEAM MANAGER:	
ADDRESS:	
HOME PHONE #:	
WORK PHONE #:	
CELL #:	
EMAIL ADDRESS:	
Check here to have a schedule faxed or emailed to you:	
ASSISTANT MANAGE	R:
HOME PHONE #:	
WORK PHONE #:	
PAYMENT INFORMATION	
Cash Checl	k Amount: \$ Check: #
Credit Card (type/number)	DOE: