



Club Information Form

Team (School & Nickname): _____

Club Representative: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

Varsity Team Head Coach: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

Varsity Team Manager: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

JV Team Head Coach: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

JV Team Manager: _____

Home Phone: _____ Work Phone: _____

E-mail Address: _____

School/Club Sponsor: _____

Home Phone: _____ Work Phone: _____

This form must be returned at the mandatory pre season Team Packet Registration