

Maracana Indoor Sports Arena, LLC

Adult Team Registration Form

Team's Information

Team Name: _____

Season: _____

League: Men's Women's Coed

Division: A / B / C / Over 45 / Open

Captain's Information

Captain's Name: _____

Captain's Phone Number: _____

Captain's Email: _____

Notes and Special Instructions

(OFFICE USE ONLY)

Date: ___/___/___ Amount Paid: _____ Receipt#: _____ Initials: _____ Signed team contract: Y / N

TEAM NAME: _____
(PLEASE PRINT THE NAMES AND JERSEY NUMBER OF ALL PLAYERS)

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

7. _____ 8. _____

9. _____ 10. _____

11. _____ 12. _____

13. _____ 14. _____

15. _____