



Orange County
Department of Environment, Agriculture, Parks and Recreation
Adult Men's Basketball League
Team Registration Form

TEAM NAME _____

SPONSOR _____

UNIFORM COLOR _____

(All players must complete an individual registration/waiver)

CAPTAIN:

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ **CELL PHONE** _____

E-MAIL _____

PLAYERS:

	FULL NAME	DOB
1.	(Captain)	
2.	(Co-captain/Vice-captain)	
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		

ENTRY FEE

DATE PAID _____ AMOUNT \$ _____ CHECK # _____ CASH _____