ANNE ARUNDEL COUNTY

DEPARTMENT OF RECREATION AND PARKS

Organized Recreation & Athletics Division

TEAM REGISTRATION FORM ****ONE TEAM PER FORM****

Season: **SPRING** FY'10 Program Year: 2010

Sport: **YOUTH GIRLS LACROSSE** Program Number: 4900 4910 4920 4930 4940

ATHLETIC/SPONSOR ORGANIZATION

Organization: _____ Phone: _____

Commissioner/Contact Person: _____

TEAM INFORMATION

Team Name: _____

Age Group: ***Circle One***	Sticklette *4900*	PeeWee *4910*	Middies *4920*	Juniors *4930*	Seniors *4940*
Level of Play: ***Circle One***	Kindergarten 1st Grade 2nd Grade Mixed	3rd Grade 4th Grade Even	A B C	A B C	NO DIVISION

Use back of form if needed…….Please list availability of each field

HOME FIELD (S) **50 YD** _____ LIGHTS? YES_____ NO _____

HOME FIELD (S) **100 YD** _____ LIGHTS? YES_____ NO _____

COACH INFORMATION **(This information MUST be completed legibility or registration will NOT be accepted)**

Coach Name: _____
Full First Name Middle Initial Last Name

Certification Number: _____ **Date of Background:** _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail address: _____

TEAM NOTES:

Fees: $75 / Sticklettes All Other $110/team **OFFICE USE ONLY**

OUT OF COUNTY ADD $150 per team

FEE PAID: _____ CHECK #: _____ DATE PD: _____