# DUNK BASKETBALL
# 2011-2012 TEAM REGISTRATION & ROSTER FORM

**MAIL FORM AND PAYMENT TO:**
Dunk Basketball
c/o Youth League
P.O. BOX 8282
Coral Springs, FL. 33075

**Money Order or Check Payable to:** Dunk Basketball

**For assistance email:** info@godunkbasketball.com

*A TEAM CONSISTS OF UP TO 12 PLAYERS AND 3 COACHES*

**CIRCLE ONE:** BOYS GIRLS **AGE GROUP:** 9U 10U 11U 12U 13U 14U Varsity

**CIRCLE EVENT:** WINTER/SPRING LEAGUE SUMMER LEAGUE TEAM CAMP

**TEAM NAME:** _____ **TEAM EMAIL REQUIRED:** _____

**HEAD COACH:** _____ **CONTACT NUMBER** _____

**ASSISTANT COACH:** _____ **CONTACT NUMBER** _____

**ASSISTANT COACH:** _____ **CONTACT NUMBER** _____

**TEAM MANAGER (IF DIFFERENT FROM COACH) :** _____ **CONTACT NUMBER** _____

**EMAIL REQUIRED:** _____

| Jersey# | PLAYER'S NAME | AGE | D.O.B. | GRADE |
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**Team Blackout Dates:** _____

** Only two blackout dates per team **

**Registration Fee: $**_____ **Membership Fees $** _____

**Total Amount Paid:** _____ **Check #** _____

OFFICE USE ONLY

__Registration Fee __Forms ___ Team Book

Form C - Team Roster
Revised 8/11