

TEAM ENTRY CONTRACT 2010-2011 MEN'S BASKETBALL

Receipt

Wrote in Folder

Signature: _____
For office use only

Please read the **SPECIAL MEMO** for information regarding fees and contract entry procedures

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SPONSOR MUST CHECK ONE OF THE FOLLOWING:

CITY OF WA-WM SPONSOR - \$315.00 NON-WA-WM SPONSOR - \$365.00

Make check or money order payable to WA-WM Recreation Department

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PLEASE ENTER YOUR TEAM IN THE LEAGUE CHECKED OFF BELOW:

NAME OF TEAM: _____ **JERSEY COLOR *:** _____

SPONSOR'S SIGNATURE: _____ TITLE: _____

SPONSOR'S NAME (PRINTED): _____ HOME #: _____

BUSINESS ADDRESS: _____ BUS #: _____

CITY: _____ STATE: _____ ZIP CODE: _____

AS SPONSOR OF THE TEAM, I APPOINT THE FOLLOWING MANAGER:

MANAGER'S NAME (PRINTED): _____ HOME #: _____

ADDRESS: _____ DAYTIME: _____

CITY: _____ STATE: _____ ZIP CODE: _____

E-mail Address: _____

***If reversible, list both light/dark colors.**

GYM LOCATION

Lincoln Elementary – 7815 W. Lapham Street

(PLEASE CHECK DESIRED LEAGUE)

MEN'S MUNI BASKETBALL LEAGUES

LEAGUE #	LOCATION	DAY	GAME TIMES	# OF TEAMS
<input type="checkbox"/> Monday	LINCOLN	MONDAY	6:15/7:15/8:15/9:15 PM	8
<input type="checkbox"/> Tuesday	LINCOLN	TUESDAY	6:15/7:15/8:15/9:15 PM	8
<input type="checkbox"/> Wednesday	LINCOLN	WEDNESDAY	6:15/7:15/8:15/9:15 PM	8
<input type="checkbox"/> Thursday	LINCOLN	THURSDAY	6:15/7:15/8:15/9:15 PM	8