

2008 FOX 4 - 7-MAN Tournament Registration Form

Event (Circle One): May 3rd July 12th August 16th September 27th

Division (Circle One): Rookie Novice

Entrance Fee:

Team Entry: \$450 per team - Save \$50 with Early Registration (2 weeks prior to event date): \$400

Team Name: _____

Team Roster:

Captain	Player 2
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Player 3	Player 4
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Player 5	Player 6
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Player 7	Player 8
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:
Player 9	Player 10
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Address:	Address:
City: State: Zip:	City: State: Zip:
Phone:	Phone:
Email:	Email:

Payment Method:

Cash

Check (Must be received 10 days prior to registration closing)

Credit Card: VISA M/C AMEX (Circle appropriate one)

Card Number: _____ **Expiration Date:** ____/____

* Waivers & Entrance Fee must accompany the Registration Form / Entrance Fee is non-refundable