



# TADA Spring registration

Division requested: \_\_\_\_\_  
(Based on 5 divisions)

**TEAM NAME:** \_\_\_\_\_

**ESTABLISHMENT:** \_\_\_\_\_

**Establishment Address/Phone:** \_\_\_\_\_

**Captains Name:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Captains Phone: H:** \_\_\_\_\_

**Cell:** \_\_\_\_\_

Please note the phone number that you would like to appear on the schedules

## Team member names:

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THIS FORM MUST BE TURNED IN TO THE SECRETARY/TREASURER NO LATER THAN JANUARY 29, 2008. For questions, please contact Linda Bender at [crb64@juno.com](mailto:crb64@juno.com) or 671-1290