



DODGEBALL JOES 2008 Team Registration Form



GENERAL INFORMATION

Please send completed registration along with payment to:

Dodgeball Joes
1355 Broad St. Regina, SK S4R 7V1

(6 to 10 players)

Team Name _____

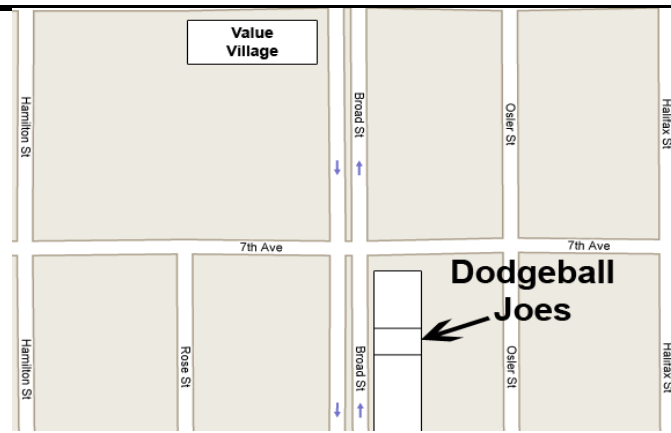
What night would you like to play?(circle)

Tuesday Early Wednesday Early Thursday Early

Tuesday Late Wednesday Late Thursday Late

What skill level best describes your team?(circle)

Non-Competitive Competitive



TEAM PLAYERS

CAPTAIN	PLAYER 2	PLAYER 3	PLAYER 4	PLAYER 5
<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth
_____ Name	_____ Name	_____ Name	_____ Name	_____ Name
_____ Telephone Number	_____ Telephone Number	_____ Telephone Number	_____ Telephone Number	_____ Telephone Number
_____ Email Address	_____ Email Address	_____ Email Address	_____ Email Address	_____ Email Address
_____ Mailing Address	_____ Mailing Address	_____ Mailing Address	_____ Mailing Address	_____ Mailing Address
_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code
PLAYER 6	PLAYER 7	PLAYER 8	PLAYER 9	PLAYER 10
<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth	<input type="checkbox"/> Male <input type="checkbox"/> Female _____ Year of Birth
_____ Name	_____ Name	_____ Name	_____ Name	_____ Name
_____ Telephone Number	_____ Telephone Number	_____ Telephone Number	_____ Telephone Number	_____ Telephone Number
_____ Email Address	_____ Email Address	_____ Email Address	_____ Email Address	_____ Email Address
_____ Mailing Address	_____ Mailing Address	_____ Mailing Address	_____ Mailing Address	_____ Mailing Address
_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code	_____ City _____ Postal Code

FOR INFORMATION CALL: CELL: 306-533-2361 HM:306-545-2169

www.dodgeballjoes.com

dodgeballaveragejoes@gmail.com