

DRPDL

REGISTRATION SHEET

Date _____ Requested Division _____

Team Name _____

Bar Name _____

Bar Ph #, Location _____

PLAYER NAME, Phone Number and email address (start with Captain)
Print clearly, **must supply at least 2 emails and Phone Numbers**

Name	Phone	Email	Gender
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_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Bar Dues \$100 Team Dues \$160

Contact Email – drpdinfo@gmail.com

Cash Paid / Cheque # _____

Comments _____
