



Pound the ROCK

Registration Form

“The BALL Made Me Do It”

* Form Info – Please complete by printing your information in each box.

Team Contact Information														
Team Name:							E-Mail:							
Contact Name:							Contact #:							
Team Mailing Address:														
City:				Province/State:					Postal/Zip Code:					
Circle Your Team Division:		M	F	COED	U10	U11	U12	U13	U14	U15	U16	U17	U19	ADULT

Player Information						
#	Player #	Player Name (First and Last)	D.O.B.	Pos.	Height	Club
0.	22	John Smith (Example Player)	Sept. 10, 1992	forward	6' 5"	Saint Motion Xavier C.I.
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						
15.						

Coaching & Athletic Staff Contact Information - *All Staff information is MANDATORY!			
Head Coach:		Assistant Coach:	
Team/Club Confirmation Information - *All fields are MANDATORY!			
I, the undersigned, accept full responsibility on behalf of my team, club and/or organization for our players, staff, parents, and family. I will abide by all Pound the Rock League rules and regulations.			
Team / Club / Organization:			
Team / Club Coach or Rep. Name (print):			
Team / Club Coach or Rep. Signature:			
Date Signed	Month:	Day:	Year:

