



2008 Spring Elite 3on3 League

Team Application Form:

Team Name: _____

Team Contact: _____

Street Address: _____

Town/City: _____ State/Zip: _____

Phone: (h) _____ (w) _____ (c) _____

E-mail: _____

Fax: _____

Please indicate what age bracket your team will be entered:

Squirt Pee wee Bantam Midget

All teams must submit roster and each team player must fill out Protechockey Ponds waiver.

