

**TALLAHASSEE PARKS, RECREATION AND NEIGHBORHOOD AFFAIRS DEPARTMENT**  
**ADULT ROSTER FORM - ATHLETICS**  
**BASKETBALL – WINTER 2019**

Team Name:

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Manager's Name:

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Address:

	ZIP	
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Telephone:

Work:

Home:

Cell:

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E-Mail Address:

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**Teams can carry as many players as they want on their roster.**

	PRINT NAME	SIGNATURE	ADDRESS	C i t y	C o u n t y	O t h e r
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