

TALLAHASSEE PARKS, RECREATION & NEIGHBORHOOD AFFAIRS DEPARTMENT
TEAM REGISTRATION FORM
ADULT BASKETBALL PROGRAM
WINTER 2019

TEAM NAME: _____

MANAGER: _____ PHONE: W) _____

E-MAIL ADDRESS: _____ H) _____

ADDRESS: _____ C) _____

CITY: _____ ZIP _____

Please check one: NEW TEAM OR RETURNING TEAM (5 or more returning players)

Division: MEN WOMEN COED

Classification: UPPER MIDDLE LOWER
(Competitive) (Somewhat competitive) (Recreation)

(Must have 4 teams within a classification to form a league)

Team name last year: _____

Classification last season: _____

Record last year: _____

NOTE: Teams are placed in leagues by the Tallahassee Parks, Recreation and Neighborhood Affairs Department based on standings. Players cannot play on more than one team per classification. Players can play on two teams in different classifications but the teams must be in classifications right above or below each other. In other words, players in the Upper classification cannot play on a team in the Lower classification. PRNA will not be responsible for scheduling conflicts when playing on multiple teams.

COMMENTS:

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FOR OFFICE USE ONLY

Date Amount Paid Cash Check # Transaction #
