

Information required for Online Team Registration

Membership Name _____ Number _____
Problem _____ Div _____

School Information	
Name	
Street	
Street 2	(Not required)
City, State, Zip	
Contact Email	

Coach Information	
First Name	
Last Name	
Street	
Street 2	(Not required)
City, State, Zip	
Home Phone	
Email	

For additional coaches the name is required and all other fields are optional.

Team Members Information			
	First Name	Last Name	Grade
1			
2			
3			
4			
5			
6			
7			

A registration confirmation email with a team login and password will be sent to the school contact and coach. Please take care to enter correct email addresses.