

**TEAM BOBCAT
LACROSSE REGISTRATION FOR SPRING 2011**

PLAYER INFORMATION (Please print)

Last Name _____ First Name _____
Grade/ School _____ Age _____
Years of Experience _____ Position(S) Played _____
Returning Player (yes or no) _____ If yes, player number _____

US Lacrosse # _____ Exp. Date _____

Southern Nevada Lacrosse Registration # _____

PARENT/GUARDIAN INFORMATION (Please print)

Contact # 1

Name _____ Relationship to player _____
Address _____
Home Phone _____ Cell phone _____
Email _____
Employer _____ Work phone _____

Contact # 2

Name _____ Relationship to player _____
Address _____
Home Phone _____ Cell phone _____
Email _____
Employer _____ Work phone _____

For Team Bobcat use only:

Team Commitment Fee of \$190 due with registration

Amount Paid: _____ Check # _____ Cash _____
Received by _____ Date _____