



<input type="radio"/> Monday – Women's Competitive	<input type="radio"/> Tuesday – Co-Ed	<input type="radio"/> Wednesday – Women's Recreation	<input type="radio"/> Thursday – Men's
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Team Name: _____

☐ **Returning Team**

☐ **New Team**

NO.	Player Name PLEASE PRINT OR TYPE	Address	Date of Birth (YYYY/MM/DD)	Phone	Email
1.	Captain:				
2.	Alternative Captain:				
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					

- **Minimum** 6 players on roster to register, maximum of 12 players. Roster additions until November 15th, 2025 (to the 12 max)
- **FULL** team payment
- **COMPLETED** Team Roster form and registration at the YMCA
- **SIGNED** Player code of conduct for **EACH** player on your roster