Information required for Online Team Registration

Membership Name _	Numb	oer
Problem	Div	

Coach's Information				
First name				
Last name				
Street				
Street 2	(Not required)			
City, State, Zip				
Home Phone				
Email				
School or Sponsoring Organization Information				
Name				
School district	(Not required)			
Street				
Street 2	(Not required)			
City, State, Zip				
Coordinator				
Phone				
E-mail				

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

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

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