## City of Carson Parks & Recreation Department

## Returning Team New Team

## Adult Sports Team Application

Last Season Participated	This Season
Team Name	Team Name
Sport	Sport
Division	Division Mens Women's Coed
Day(s) Requested  1 2 3	
Team Manager	Asst. Team Manager
Name	Name
Address	Address
City, State, Zip	City, State, Zip
Home ( ) Cell ( )	Home ( ) Cell ( )
Email:	Email:
Roster Restrictions	
Please type or print entire roster and registration application legibly All rosters must include players signatures - NO EXCEPTIONS! All participants play at their own risk Managers and assistants must be listed on the rosters if playing All Changes to official rosters must be cleared through the Adult Sports Office    Sport   Max Players	
For Office Use Only	
Paid Payment can be Roster Parks & Re 18601 S. Ma Carson, C Attn: Adult	ecreation (310) 847-3576 EA 90248