

TEAM REGISTRATION FORM
-MENS WINTER LEAGUE 2024/25-



Team Name:..... Shirt

Color:.....

Team Manager Name:.....

Team Manager Number:.....

Team Manager e-mail:.....

Please also attach your team logo.

TEAM ROSTER

<u>A/A</u>	<u>NAME</u>	<u>SURNAME</u>
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Manager Signature:.....

Date:.....