



2011 Fall Dart Registration



MILBANK- CLEARLAKE

GOODWIN - HAMLIN COUNTY

Please Print Clearly, and include address and phone number to better assist us.

Name of Bar Sponsoring your Team _____
Team Name _____

Team Names - This will be the name of your team on standings. You don't need to pick one now, but if you don't, the name will be your bar's name and the last name of the captain. **After leagues have begun, names can not be changed.**

Captain's Name: _____

Captain's Address: _____

City: _____ State: _____ Zip: _____

Work/Cell: _____ Shirt Size: _____

Phone #'s Home: _____ E-Mail: _____

(Both phone numbers are required unless you use a cell phone and can answer it during the daytime hours.) These numbers are necessary so we can reach you. If a work number is unavailable, we must have another contact on the team. If you have an email address that you check regularly - please include that information also.

Did your team play last year? (even if members have changed) Yes No

Please Check One. (MUST FILL OUT SEPARATE FORM FOR EACH NIGHT YOU PLAN TO PLAY)

MILBANK Thursday 501 <input type="checkbox"/> Friday Mixed Couples 501 <input type="checkbox"/>	CLEARLAKE Tuesday 501 <input type="checkbox"/>	Goodwin Friday Team 501 <input type="checkbox"/>	Hamlin County Thursday Darts <input type="checkbox"/>	
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PLEASE LIST BELOW THE NAMES OF ALL YOUR PLAYERS. YOU MUST LIST YOUR FOUR REGULAR PLAYERS AND AT LEAST ONE SUB. **You must include players addresses.**

CAPTAIN	Captain Information- if you filled out the top of the form you do not need to duplicate the info for this player!		
PLAYER 2	NAME: _____		
ADDRESS	_____		
EMAIL	_____		
PHONE	_____		
	SHIRT SIZE _____		
PLAYER 3	NAME: _____		
ADDRESS	_____		
EMAIL	_____		
PHONE	_____		
	SHIRT SIZE _____		
PLAYER 4	NAME: _____		
ADDRESS	_____		
EMAIL	_____		
PHONE	_____		
	SHIRT SIZE _____		
SUB	NAME: _____		
ADDRESS	_____		
EMAIL	_____		
PHONE	_____		
	SHIRT SIZE _____		