

Spring 2012 Season

HOWARD COUNTY DART ASSOCIATION TEAM ROSTER

Division: AA, A, BB, B

Requested Bar: 1st _____ 2nd _____ 3rd _____

CAPTAIN: _____

PLEASE COMPLETE (PRINT) ALL INFORMATION FOR EACH TEAM MEMBER.

Player Name: _____	Home Phone: _____
Address: _____	Work/Cell Phone: _____
_____	E-mail: _____
Amount Paid: _____	Cash _____ Check # _____

Player Name: _____	Home Phone: _____
Address: _____	Work/Cell Phone: _____
_____	E-mail: _____
Amount Paid: _____	Cash _____ Check # _____

Player Name: _____	Home Phone: _____
Address: _____	Work/Cell Phone: _____
_____	E-mail: _____
Amount Paid: _____	Cash _____ Check # _____

Player Name: _____	Home Phone: _____
Address: _____	Work/Cell Phone: _____
_____	E-mail: _____
Amount Paid: _____	Cash _____ Check # _____

Player Name: _____	Home Phone: _____
Address: _____	Work/Cell Phone: _____
_____	E-mail: _____
Amount Paid: _____	Cash _____ Check # _____

Team Fee: \$ 24.00 per player, if non-HCDA members \$12.00 annual fee.

Payment due at sign-up

All Roster members MUST be HCDA members. Please make all checks

Payable to: Howard County Dart Association (HCDA)

A Returned check fee will be charged for all dishonored checks.