

TURKEY SHOOT

Team ID _____



Specify the Division & number of teams you are bringing for each division. → U13 _____ U15 _____ JV _____ Varsity _____

Name of team _____ Locality _____

Contact Name _____ ★ e mail _____

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ - _____ - _____ Fax _____ - _____ - _____

★ Cell Phone _____ - _____ - _____ Work Phone _____ - _____ - _____

★ Absolute necessity

Mail THIS form & ALL athlete waivers together by 11/13/07

Please send TOP portion ONLY !

Submit ALL waivers by 11/13/07 _____ Trojan Lacrosse _____ 300 Unity Lane Annapolis, MD 21401

TURKEY SHOOT

NOV. 23, 2007

BATES ATHLETIC COMPLEX - ANNAPOLIS

