## 2017 CENTEX Series Team Registration Form

Manager Name: Phone Number:						Te	am Name:				
		Email:									
League (circle):		GT LT	ОН	СР	LH	RR	SB-PV	TC	LV	Division	
Age Group	(circle):	5	5-6U	7-81	J	9-10U	11-12	J	13-14U	. ,	
Uniform # (During Centex Play)	Shirt Size	Hat Size		Player	Name ame on Birth	(Last, Certificate)	First)		ate of Birth	League Team Name (Played on During Season)	
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indicated; insurance.	no OP	EN (Se	lect)	players	are o	n this r	oster. Pla	ayer		ams within the leavered by their lead	_
CENTEX Tec						•					
League Pre	esident	or Offic	er:								
CENTEX Rep	oresent	ative:									