## 2021 CENTEX Series

## Team Registration Form

Name of Organization:				Team Name:	Team Name:		
Manager Name:				Email:	Email:		
				Cell/Text Num	nber:		
Age Group (circle) 6u 8u 10u 12u 14u				Division (circle	Division (circle) I II		
Uniform # (During Centex Play)	Pla	ayer Name (	(Last, First)	Date of Birth		ue Team Name Season Team Name)	
			-	Recreational teams with	_	ue indicated; no	
I certify that	ALL PLAYERS	listed abov	e meet the Pla	yer Eligibility Guideline	s listed ab	ove.	
Team Manag	ger:				· · · · · · · · · · · · · · · · · · ·		
League Pres	ident/Rep:						
Centex Rep:							