

Adult Team Registration Form

(Please circle the season, league & day of program)

1. **Season/Tournament:** **Fall** **Winter** **Spring** **Summer**
Men's Basketball Men's Softball Co-ed Softball Other: _____
Men's Flag Football Women's Volleyball Co-ed Volleyball
Men's Soccer A Men's Soccer B Co-ed Soccer
2. **Days:** Monday Tuesday Wednesday Thursday Friday Saturday
3. **Team's Name** _____
4. **Manager's Name** _____
- Phone Number:** (Home) (____) _____ (Cell) (____) _____

5. How would you rate your team's ability? (With "A" being best)

A B C D

6. **I agree to the following:**

1. I will abide by the league rules and code of conduct with my team.
2. I will discourage rough play and unsportsmanlike conduct.
3. I will conduct myself and my team in a sportsmanlike manner at all times, on and off the playing field.
4. The league's fee must be paid prior to league sign-up deadline.
5. I understand that there must be a minimum number of players for the league or division I selected.
6. All fees are non-refundable.

Signature: _____ **Date:** _____

Payment received: \$ _____ Staff initial: _____ Date: _____

**Make checks payable to: The Mesquite Recreation and Parks Department
(This form will not be accepted without payment)**