

VAPOR TOURNAMENT SERIES & OPEN CLASS PUMP SERIES

TEAM REGISTRATION FORM

(Please Print Legibly)

Team Name _____

Team Captain _____

Phone :(h) _____ (C) _____

Address: _____

E-mail: _____

Tournament Limited to first 20 teams registered

Sign up early to secure your team a spot.

****DEADLINE TO REGISTER-WEDNSDAY BEFORE EVENT****

REGISTRATION FEE IS \$50

Gates open at 8am first match at 10am sharp

******Field Paint only!******

Using non-field paint is grounds for team disqualification.

Center flag Rules apply

Semi-auto ONLY! 15BPS cap

WAIVER OF LIABILITY: All players must complete a field liability waiver form to be eligible for play.

As team captain I will follow all rules and guidelines when on and off the playing field. I will play in an honorable manner and encourage my teammates to do the same.

Team Captain Signature _____ Date _____

Please check one

Vapor series

Pump Series

Team Roster

(3 players with 2 subs max)

1. _____ age _____

2. _____ age _____

3. _____ age _____

4. _____ age _____

5. _____ age _____