

OYSCL ENTRY FORM (FORMA DE REGISTRO TEAM)



PLEASE PRINT LEGIBLY OR TYPE (form must be completed before it will be accepted)

Division:	Year
, CA	Zip:
	Division:, CA

As the team manager and assistant we hereby verify that all players on this team are eligible to participate in league/tournament play, are aware of the rules, and other specific information regarding the manner in which the league/tournament is to be conducted and fulfill the requirements formulated by the organizers of this tournament.

WE ACCEPT RESPONSIBILITY FOR SUPERVISING THE CONDUCT OF ALL PLAYERS LISTED ON THIS ROSTER WHILE PARTICIPATING IN THIS LEAGUE/TOURNAMNET, AND WE AS A TEAM WILL STRIVE TO PROMOTE FAIR PLAY AND GOOD SPORTSMANSHIP FOR THE BETTERMENT OF THE LEAGUE/TOURNAMENT.

Manager's Signature	Date	Assistant Manager's Signature	Date
	2		2