

Boys Fall High School Team League 2010



2010 FALL LEAGUE REGISTRATION FORM

Any Questions Contact John E. Bucci at jbucci@backcourthoops.com

TEAM: _____ SCHOOL: _____

1ST Contact: _____ Email: _____

Address: _____ State: _____ Zip Code: _____

Phone #: _____ Cell Phone #: _____

2nd Contact: _____ Email: _____

Address: _____ State: _____ Zip Code: _____

Phone #: _____ Cell Phone #: _____

Varsity 6 Game season \$300

**November 9, November 11, and 4 games
November 13 & 14**

Any Questions Contact John E. Bucci at jbucci@backcourthoops.com

For office use only:

Amt pd. _____ Date Rec. _____ Balance _____