Team Roster Form

Bethany First Church
Recreation Ministries
6789 NW 39th Expressway
Bethany, OK 73008
789-2050

Fee Enclosed
$_____

INSTRUCTIONS

A. DO NOT TURN IN IF INCOMPLETE
B. BE NEAT—PLEASE PRINT CLEARLY
C. PLEASE SUBMIT ONE CHECK FOR EACH LEAGUE YOU ARE REGISTERING
D. INDICATE NAME OF CHURCH OR TEAM
E. INDIVIDUAL REGISTRATION FORMS MUST BE COMPLETED AND ATTATCHED TO COMPLETED ROSTER

Make Checks Payable To:
Bethany Nazarene

TYPE	SPORT
X Men	**X** Basketball
❑ Women	❑Softball
❑ Co-Ed	❑ Other
❑ Other	

Coach/Team Captain

Name _____
Address _____
City _____ Zip _____
Home Phone _____
Work/Cell Phone _____
Email _____

TEAM INFORMATION

Name
_____

Church
_____

PLAYER INFORMATION

1. Player's Name _____ **Phone** _____
Address _____
City _____ **Zip** _____

2. Player's Name _____ **Phone** _____
Address _____
City _____ **Zip** _____

3. Player's Name _____ **Phone** _____
Address _____
City _____ **Zip** _____

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4. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

5. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

6. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

7. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

8. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

9. Player's Name _____ Phone _____
   Address _____
   City _____ Zip _____

10. Player's Name _____ Phone _____
    Address _____
    City _____ Zip _____

11. Player's Name _____ Phone _____
    Address _____
    City _____ Zip _____

12. Player's Name _____ Phone _____
    Address _____
    City _____ Zip _____