

Broomfield Fives Registration Form

Please complete this form to register your entire team for our summer Five-A-Side league. The cost is \$230 per team youth team, \$280 per adult team. Checks should be made out to "Broomfield Blast" and sent with this form to: -

- Broomfield Fives, 60 Garden Canter, #201, Broomfield, CO 80020
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Team Name: _____ Team Type: Boys Girls

Age Group: U9-10 U11-12 U13-14 U15-16 U17-18 Adult

Coach or Manager Name: _____ Email: _____

Address: _____ Cell Phone: _____

	First Name	Last Name	Date of Birth	Shirt Size
1				YL S M L XL
2				YL S M L XL
3				YL S M L XL
4				YL S M L XL
5				YL S M L XL
6				YL S M L XL
7				YL S M L XL
8				YL S M L XL
9				YL S M L XL
10				YL S M L XL

I understand that prior to my team's first game, I will be responsible for making sure that all participants bring copies of birth certificates (adults excluded!), medical and photo waivers, and (if applicable) CYS player cards.