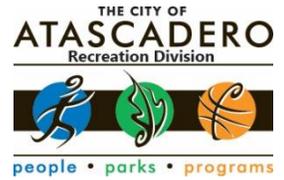




City of Atascadero  
Recreation Division



## ADULT BASKETBALL LEAGUE TEAM APPLICATION AND ROSTER

TEAM NAME: \_\_\_\_\_ SEASON: SPRING 2023

**\*\*\*GAMES WILL TAKE PLACE ON SUNDAYS\*\*\***

**DIVISION:** UPPER or LOWER (please circle one)

Team Manager: \_\_\_\_\_

Assistant Manager: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W) \_\_\_\_\_

Phone (H): \_\_\_\_\_ (W) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Applications are accepted on a team basis only. **Applications must be filled-out completely with names, phone numbers, and addresses. Incomplete rosters will not be accepted, NO EXCEPTIONS.** There is a minimum of 7 players and a maximum of 12 players per roster.

**League fees are \$448.00 per team. Non-residents are \$5 per player, 8 or more non-residents, add 10% (\$44.80)**

### ACTIVITY NUMBER

#1300.793

As manager I assume responsibility for the conduct and sportsmanship of all team members. All information provided on the front and back of this form is valid and verifiable. **Sign both sides.**

**MANAGER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

(More on the back)

### OFFICE USE ONLY:

League Fees: \_\_\_\_\_ Non-Resident Fees: \_\_\_\_\_ Total Fees: \_\_\_\_\_

Date Paid: \_\_\_\_\_ Receipt Number: \_\_\_\_\_ Approved By: \_\_\_\_\_

**ADULT BASKETBALL LEAGUE  
TEAM APPLICATION AND ROSTER**

All information must be clearly legible, accurate, and verifiable.

**TEAM NAME:** \_\_\_\_\_ **SPONSOR:** \_\_\_\_\_

**PLEASE PRINT**

PLAYERS NAME	PHONE	ADDRESS	CITY
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

As manager I assume responsibility for the conduct and sportsmanship of all team members.  
All information provided on the front and back of this form is valid and verifiable. **Sign both sides.**

**MANAGER'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_