MITCHELL PARKS & RECREATION DEPARTMENT

5 ON 5 MEN'S FLAG FOOTBALL LEAGUE

TEAM ROSTER FORM 2009

Team Name_____

Captain Name_____ Home Phone_____ Cell Phone_____

Email Address_____ Address_____ Town_____

TEAM FEE: $200.00

There will be a managers meeting on Wednesday, September 2nd at 5:30 pm at the Recreation Center.

Roster:

**Maximum 12 players per team. Any changes or additions must be done before September 21st.

Name	Address	Phone	Age