HUMBOLDT PARKS & RECREATION DEPARTMENT

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rechbt@ci.humboldt.ia.us

PROGRAM: _____

TEAM NAME: _____ MANAGER: _____

ADDRESS: _____

HOME PHONE: _____ EMAIL: _____

Name	Address	Phone	Shirt Size

(*20 Players maximum per roster)

For office use only:
Amount paid: _____ Date received: _____ Received By: _____