## 2023 WPLGASC TEAM REGISTRATION

PLEASE DETACH THIS FORM. PRINT or WRITE LEGIBLY. ENTER ALL INFORMATION REQUESTED ON THE FORM. DEADLINE: Forms must be received NO LATER THAN OCTOBER 17, 2022

 ULL CLUB NAME:
\$ 50.00 PER 2022 TEAM
TOTAL NUMBER OF TEAMS ENTERED:
AMOUNT INCLUDED:
TOTAL NUMBER OF TEAMS ENTERED:

One form and 1 check for all teams PER CLUB payable to WPLGA. All information is required in order to register your club teams. Please list a captain or a current contact for each team. Most communication is handled by email transmission. IT IS VERY IMPORTANT that you include one (1) email address per team for email transmissions.

- Clubs that wish to enter two (2) A or two (2) B teams or Two-Club teams must check with Clare Ittner prior.

Check please! A Team	TEAM CAPTAIN "A"	Did you register in 2022?	YES NO_
Name			
Address			
City	Zip	Phone ()	
Email contact-A Team (required):			
Check please! B Team	TEAM CAPTAIN "B"	Did you register in 2022?	YES NO
Name			
Address			
City	Zip	Phone ()	
Email contact-B Team (required):			
Check please! A2 Team	(Must be approved b	oy Team Chair BEFORE regi	istration.)
TEAM CAPTAIN "A2" Name			
Address			
City	Zip	Phone ()	
Email contact-A2 Team (required): _			
Check please! B2 Team	(Must be approved b	y Team Chair BEFORE regi	stration.)
TEAM CAPTAIN "B2" Name			
Address			
City	Zip	Phone ( )	

REGISTRATION FORM/S AND FEES ONLY with one check payable to WPLGA.

## TWO (2) CLUB TEAMS ONLY BOTH CLUBS MUST BE WPLGA MEMBERS 2022 WPLGASC TEAM REGISTRATION

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<b>DEADLINE:</b> Forms	s must be received NO LA	TER THAN OCTOBER 17, 2022.	
ENTRY FEE: \$ 50.00 PER 2-CLUB TEA		DED:CHECK #: check to WPLGA per club	
All information is required in order to registe team. Most communication is handled by one (1) email address PER TEAM for	email transmission.   T	e list a captain or a current conta	ct for each uinclude
2-Club Team Entry: PLEASE, Ch	eck with Clare BEFOR	E you register a 2 Club Team	<mark>n.</mark> 562 923 9965
2-Club Information: BOTH CLUB NAMES			
Check please! A B			
TEAM CAPTAIN 2-Club TEAM			
Name		Club	
Address			
City	Zip	Phone ()	
SEND TO: Clare Ittner, T	F THIS DOCUMENT FOR RE ON FORM/S AND FEES ONL FEAM 2023 950 eibear@dslextreme.com	Y with one check payable to WPLG 6 La Reina Ave., Downey, CA 9024 562 923 9965	SA. 40
Two-Club Team Entry: PLEASE	, Check with Clare Ittn	er BEFORE registration. 562	2 923 9965)
2-Club Information: BOTH CLUB NAMES			
Check please! A B			
TEAM CAPTAIN Two-Club B TEAM			
Name		Club	
Address			
City		Phone ()	
Email contact- 2-Club Team (required)			