**WCTC FORM FOR OBTAINING A TEAM NUMBER - 2025**

All red fields plus your player list must be filled in electronically.

1. Email completed form to [willowcreek123tennis@gmail.com](mailto:willowcreek123tennis@gmail.com) and [marybethdoerr@gmail.com](mailto:marybethdoerr@gmail.com), then
2. Print form and deliver with check to Facility Coordinator (Mary Beth Doerr) at **8072 S Rosemary Ct Centennial, CO 80112**

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| --- | --- | --- | --- |
| **Captain's Name:** |  | **League:** |  |
| **Captain's Email:** |  | **NTRP:** |  |
| **Captain's Cell Phone:** |  | **League Type:** |  |
| **Captain's WC HOA:** |  | **Day and Time:** |  |
| **Team Sponsor's Name (required only if captain doesn't live in WC HOA 1, 2, or 3):** |  | **Court Fee $:** |  |
| **Team Sponsor Email:** |  |  | |
| **Team Sponsor's Cell Phone:** |  |
| **Team Sponsor's WC HOA:** |  |
| **Co-Captain's Name (optional):** |  |
| **Co-Captain's Email:** |  |
| **Co-Captain's Cell Phone:** |  |
| **Volunteer's Name:** |  |
| **Volunteer's Email:** |  |
| **Volunteer's Cell Phone:** |  |
| **Volunteer Position: (required)** |  |
| **Volunteer Position: (if other)** |  |
| **Name of Player (type or select from list):** | **Email of Player:** | **WC HOA:** |  |
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| **Any Other Notes to the Coordinator:** | | |
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