

Middletown Bocce Ball League

Date Received _____

2025 Team Registration (This form must be accompanied by at least 4 player registrations and fees.)

Submit this sheet, player fees and the individual signed registration forms when complete. **PLEASE PRINT CLEARLY**

NOTE: The date this is received will establish priority for a specific **schedule choice (optional)**. 1st _____ 2nd _____ 3rd _____ 4th _____ Hand these completed forms and payment to a board member or mail to MBBL, P.O. Box 1753, Middletown, CA 95461.

Team Name:

Capo Name	Phone	Email (required)	Signature
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Assistant Capo Name (Required)	Phone	Email (required)	Signature
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By their signature, the above Capo and Assistant Capo are certifying that they have read and understand that they agree to abide by the **Capo Responsibilities, Rules and Regulations and Rules of Conduct**, and that they have verified that the team members listed below have read and understand the **Rules and Regulations and Rules of Conduct**.

	Player Name
1	
2	
3	
4	
5	
6	
7	
8	

Teams must have at least 4 players. Players may be added at any time prior to September 8.

There is no limit to the total players on the team.