

NORTHWEST LACROSSE TEAM

Registration

PLAYER CONTACT INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip-Code: _____

Cell Phone: _____

Email: _____

PARENT CONTACT INFORMATION

Name: _____

Street Address: _____

City: _____ State: _____ Zip-Code: _____

Cell Phone: _____

Home Phone: _____

Email: _____

PLAYER UNIFORM SIZE PREFERENCE

| Item | Size Preference | | | | |
|-----------------|-----------------|--------|-------|---------|----------|
| | Small | Medium | Large | X-Large | XX-Large |
| Sweat-Shirt | | | | | |
| Sweat-Pants | | | | | |
| Practice Shorts | | | | | |
| Game Shorts | | | | | |
| Shooting Shirt | | | | | |