



NORTH JEFFCO PARK AND RECREATION DISTRICT

Garrison Street Sports Center

9101 Ralston Road 303-431-9600 Arvada, CO 80002



MANAGER'S INFORMATION FORM

Circle One: Softball Basketball Basketball Flag Football Volleyball Soccer

(Please Print)

Team Name _____

Name of Sponsor (if any) _____

Manager's Name _____

Address _____ City _____ Zip _____

Phone: Home _____ Business _____

IN CASE WE CANNOT CONTACT YOU, PLEASE INDICATE THE ASSISTANT MANGER:

Name _____

Address _____ City _____ Zip _____

Phone: Home _____ Business _____

Indicate which league number you would like _____ Day _____

Second Choice _____ Day _____



**I DO HEREBY AGREE TO ABIDE BY ALL THE RULES, REGULATIONS AND
CODE OF CONDUCT OF THE NORTH JEFFCO SPORTS PROGRAM.**

Manager's Signature _____

Enclosed is \$ _____ entry fee.

Date Paid _____ Amt. Paid _____ Cash _____ Check # _____

Visa/MasterCard/Discover _____ Exp. Date _____ Init. _____

Refund Policy: Team registration fees/ deposits are 80% refundable 3 weeks prior to league/tournament start date. No fees will be refunded within 3 weeks of scheduled league/tournament start date.