



Drink Responsibly.
Drive Responsibly.

Summer Session 2024 Team Entry – Roster Form

\$120.00 SPONSOR FEE MUST BE PAID WITH REGISTRATION OR YOUR ROSTER WILL NOT BE ACCEPTED. Your Roster Form AND Sponsor Fee payment must be received **no later than May 23, 2024** for your team to be scheduled to participate. **Player's dues of \$25 per player** must be paid upon each player's **third week** of match play, or that player's scored points may be forfeited. **Summer season matches start Thursday, June 13, 2024.** Make all checks payable to NHDL.
Mail to: NHDL, 136 Waverly Road, Shelton CT 06484

Team Name: _____ Proposed Division: _____

Team Sponsor Information

Team Captain Information

Name: _____

Name: _____

Address: _____

Shirt Size: _____

Address: _____

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Phone: _____

Phone: (Req): _____

Email: _____

Email (Req): _____

Team Administrator REQUIRED (for web entry of match results)

You MUST designate one or more persons to be the Administrator for your team for online entry of match results. Team Administrators do not have to be a Captain, but should have access to the Internet on a daily basis.

Name: _____ Phone: _____ Email: _____

Name: _____
Phone: _____
Email: _____
(optional)

Regular Roster Players (do not include Captain)

Player 2: _____ Email: _____

Shirt Size: _____

Player 3: _____ Email: _____

Shirt Size: _____

Player 4: _____ Email: _____

Shirt Size: _____

Player 5: _____ Email: _____

Shirt Size: _____

Player 6: _____ Email: _____

Shirt Size: _____

ADDITIONAL ROSTER PLAYERS MAY BE ENTERED ON THE BACK

CONTACT INFORMATION PROVIDED MAY BE USED AT THE LEAGUE'S DISCRETION IN LEAGUE DOCUMENTS, WEB SITE POSTINGS, ETC.

FOR LEAGUE USE ONLY—DO NOT WRITE IN THIS AREA

Total Paid: _____ Date Paid: _____ Cash Check # _____ Approved Division: _____

Total Sponsor Fee Paid: _____ Total Player's Fees Paid: _____ Balance Due: _____