

Wood River Parks & Recreation Registration Form

League Name: _____

Team Name: _____

Manager's Name: _____

Address: _____

City: _____ Zip _____

Phone: (Home) _____ (Work) _____

(Cell) _____

E-mail Address _____

******I understand that for the mutual protection of all clubs entered and to ensure fulfillment of the schedule and proper conduct of players and management, an entry fee shall be levied.**

Manager's Signature: _____

For office use only:

Date: _____ Amt. Paid _____ Received by: _____

Make all checks payable to: Wood River Parks & Recreation

**Wood River Park and Recreation
633 N. Wood River Ave.
Wood River, IL 62095**