

Skippack Township
Parks & Recreation Department
4089 Heckler Road
P.O. Box 164
Skippack, PA 19474
Phone: 610-454-0909 Fax: 610-454-1385

Bocce League Re-Registration Form

PREFERRED LEAGUE NIGHT: (Game times are 6:30 to 8:00 each evening)

_____ Monday _____ Tuesday _____ Wednesday _____ Thursday

TEAM NAME: _____

NUMBER OF TEAM MEMBERS: _____

TEAM MEMBERS NAMES: 1. _____ (Captain)

2. _____ 3. _____

4. _____ 5. _____

6. _____ 7. _____

8. _____ 9. _____

10. _____ 11. _____

12. _____

HOW MANY MEMBERS ARE **NOT** RESIDENTS? _____

***If you want to add a new Teammate to your team...please have them fill- out a Waiver and Release form!

Also, just put their basic information on the back of this form! THANK YOU!!!

Team Captians Phone: _____

Team Captians E-mail: _____