NEGFL TEAM REGISTRATION FORM 2023-2024

TEAM:							
Head Coach Assistant Coach			Home # Home #		Work # Work #		
	First Name	La	ast Name	Age	Birthdate	School Attending	Report Card Attached
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

Team Director	Team Director:	Director Approval Date:		
Team Certified	Certified by:	Certification Date:	Paid:	