



SPORTS REGISTRATION FORM
Captain's Cup Disc Golf Tournament

NAME of UNIT / COMMAND / DEPARTMENT:

COACH / MANAGER NAME:

CELL NUMBER:

EMAIL:

TEAM 1, PLAYER 1 NAME:

TEAM 1, PLAYER 2 NAME:

TEAM 2, PLAYER 1 NAME:

TEAM 2, PLAYER 2 NAME:

TEAM 3, PLAYER 1 NAME:

TEAM 3, PLAYER 2 NAME:

TEAM 4, PLAYER 1 NAME:

TEAM 4, PLAYER 2 NAME:

STAFF USE (please do not write here)

Date Received: _____

Staff Initials: _____