

WOMEN'S TENNIS TEAM REGISTRATION FORM

Name: _____

Phone#: _____

Address: _____

e-mail: _____

Would you prefer to play: singles doubles either

How would you rate yourself? (Circle one) B B- C+ C

Please list dates (May, June) you will be available for matches:

5 / 16 5 / 23 5 / 30

6 / 6 6 / 13 6 / 20

Available for practices: Yes No