

**FORSYTH COUNTY PARKS AND RECREATION DEPARTMENT
ADULT ATHLETICS – COMMITMENT FORM
ULTIMATE FRISBEE**

CIRCLE ONE:

MEN'S

CHECK LEAGUE:

_____ OPEN LEAGUE:

TEAM NAME: _____

MANAGER: _____

DOB: _____

ADDRESS: _____

CITY: _____

ZIP CODE: _____

HOME PHONE: _____

WORK PHONE: _____

ASST. MANAGER: _____

ADDRESS: _____

CITY: _____

ZIP CODE: _____

HOME PHONE: _____

WORK PHONE: _____

E-MAIL ADDRESS: _____

CHURCH ONLY – LIST CONFLICTING DATES:

SPRING REVIVAL DATES: _____

SUMMER REVIVAL DATES: _____

BIBLE SCHOOL DATES: _____

**** Dates listed above will be given the last game time of the night**

BY TURNING IN MONEY AND COMMITMENT FORM, I, THE UNDERSIGNED, ACKNOWLEDGE THAT MY TEAM INTENDS TO PARTICIPATE AND CANNOT RECEIVE ANY REFUND UNDER ANY CIRCUMSTANCE. I HAVE ALSO RECEIVED A TEAM PACKET AND WILL ABIDE BY ALL THE RULES AND REGULATIONS SET FORTH BY THE FORSYTH COUNTY PARKS AND RECREATION DEPARTMENT.

SIGNATURE REQUIRED

FOR OFFICE USE ONLY:

ENTRY FEE: _____

PAID BY: _____

DATE: _____

CHECK #: _____

RECEIPT #: _____

RECEIVED BY: _____