OFFI	CE USE (ONLY	City of Staughton Degraption Department								
League	Team 00	Date Rec'd	City of Stoughton Recreation Department RESIDENT 321 S. Fourth Street Stoughton, WI 53589								
	•		🗸 One	🗖 Basketball	🗖 Softball		Volleyball	Dodgeball			
Last Name			Firs Naı		E-1						
Street	Resident Zip Street Code										
ResidenceBusinessPhonePhone						Employer					
I agree to play for the team listed. I agree to abide by the regulations set by the Stoughton Recreation Department. It is agreed that by signing this form I will be responsible for the injuries to my person and/or damage to my property that could occur as a result of my participation in this program.											
Player's Team Signature X Name											
I agree to be responsible for Manager's Date the eligibility of this player Signature Signature								1			

OFFICE USE ONLY		City of Stoughton Recreation Department									RESIDENT	
League	Team 00	Date Rec'd		Non-Resident								
						G(1)	11.11 52	500				
		321 S. Fourth Street Stoughton, WI 53589										
			>	One	🗖 Baske	tball	🗖 Softba	1		Volley	yball	Dodgeball
Last First						Middle			E-Mail Address			
Name	Name Name Initial											
Resider	nt											Zip
Street												Code
Addres	s								STOU	GHTON		
Resider	Residence Business							Employer				
Phone	Phone Phone											
I agree	I agree to play for the team listed. I agree to abide by the regulations set by the Stoughton Recreation Department. It is agreed that by									is agreed that by		
signing this form I will be responsible for the injuries to my person and/or damage to my property that could occur as a result of my												
participation in this program.												
Player's Team												
V Name												
Signature A												
I agree to be responsible for Manager's Date								Date				
	Signed											
the eligibility of this player Signature												

OFFICE USE ONLY			City of	RESIDENT							
League	Team 00	Date Rec'd	City of Stoughton Recreation Department RESIDENT Non Resident								
						-00					
		321 S. Fourth Street Stoughton, WI 53589									
✓ One □ Basketball □ Softball □ Volleyball Dodgeball											
Last			Firs	t	Middle	E-1	Mail Address				
Name Nam				ne Initial							
Resider	nt							Zip			
Street	Code										
Addres	Address STOUGHTON										
Resider	nce			Business		Employer					
Phone	Phone Phone										
I agree	I agree to play for the team listed. I agree to abide by the regulations set by the Stoughton Recreation Department. It is agreed that by										
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Player's Team											
Name Name											
I agree to be responsible for Manager's Date											
Signed											
the eligibility of this player Signature											