Arizona Tennis Association

Team Registration Form

Team Name: _____

League Division: *(Based on options below)* _____

Women's Daytime:	Mondays 9:00 AM	5.0 I, 5.0 II, 3.5 3.0	
	Wednesdays 9:00 AM	4.5, 4.0	
Women's Evening:	Mondays	3.5, 4.0, 4.5	***Start Times may Vary**
	Wednesdays	5.0	***Start Times may Vary**
Men's Daytime:	Saturdays	4.5, 4.0, 3.5	***Start Times may Vary**
Fantastic 50's	Friday Mornings	3.5, 4.0, 4.5+	***Start Times may Vary**

Team Captain: _____ **Date of Birth:** _____

Address: _____

Home Phone _____ **Cell Phone:** _____

Email Address: _____

Tennis Facility for "Home" matches: _____

***Enter Preferred Start Time** _____

Co-Captain (if applicable): _____

The Team Registration Fee of $25 Must Accompany this Form. Please include the $32 Insurance fee if your team plays at Scottsdale Ranch Park or Indian School Park

Make Checks Payable to ATA

► ***Mail to: ATA % Jo Peterson . PO Box 20664 . Mesa, AZ 85277***