



2010 FOOTBALL SEASON

Team NAME _____

Captain's NAME _____

ADDRESS _____

CITY _____ IL ZIP _____

HOME PHONE _____ CELL PHONE _____

EMAIL ADDRESS _____

CO-CAPTAIN _____

ADDRESS _____

CITY _____ IL ZIP _____

HOME PHONE _____ CELL _____

EMAIL ADDRESS _____

FEE PAYMENT BY: CASH _____ CHECK _____

Make check out to : NORTHFIELDFOOTBALL LEAGUE

(NO REFUNDS) TO TEAMS

**CAPTAINS MEETING:
ONE REPRESENTATIVE MUST BE THERE FROM EACH TEAM
ROSTERS Due on the 1st GAME**