

**Team Registration Form-$350**

Send completed form to [office@americanwaterpolo.org](mailto:office@americanwaterpolo.org)  
Payment can be made by check to AWP 129 W 4th St Bridgeport PA 19405

Deadline for team registration is June 29

Team \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Team Contact\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Roster (must have at least six players)

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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