

PALM BEACH COUNTY DARTING ASSOCIATION
OFFICIAL TEAM ROSTER ENTRY FORM

Please list all players on your roster so that your team may be placed in a division that will closely match your team's level skill. Changes may be made anytime before the deadline listed below, after the deadline you must notify the membership committee of any player being added with a 24 hour notice prior to match play.

ROSTER MUST BE TURNED IN BY: August 19th

WE MUST HAVE ADDRESS or E-MAIL & PHONE NUMBER FOR EACH PLAYER (Required by the FDA)

SPONSORS NAME (BAR) _____ PHONE NUMBER _____ DIVISION REQ. _____

Divisions 1 / 2 MONDAY NIGHT _____ **Divisions A / B WEDNESDAY NIGHT** _____

Limit 6 players

Limit 7 players

A lady must play on Wednesday

Please put Captain first

Please, circle Male or Female

E-mail address _____

Person receiving standings

	PLAYER	PHONE NUMBER	DIV LAST PLAYED
M 1.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 2.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 3.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 4.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 5.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 6.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	
M 7.	_____	_____	_____
F	_____		
	E-mail Address	Home address if no e-mail	

NEW SEASON WILL BEGIN THE WEEK OF...AUGUST 26th

PACKET PICK UP TO BE ANNOUNCED

Deadline for the payment of dues will be the 3rd week. Penalties for late payments are outlined in the rulebook received in your Captains packet. Please contact...Brian Lewis if you need additional info. Cell 561-714-0367 email: shootdarts@gmail.com

