



# Fall 2018 Roster Form

Office Use
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TEAM NAME \_\_\_\_\_ (16 Character Maximum)

SPONSOR: \_\_\_\_\_ TEL: \_\_\_\_\_

PUB NAME: \_\_\_\_\_

Division Preference: _____ (Optional)
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PUB ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

**Phone Numbers and Addresses for the Captain and Assistant Captain are REQUIRED!!**  
Updates must be sent to the League if they change during the season. (Phones are required for Captains & Assistants.)

<b>CAPTAIN</b>	PHONE: _____	Prev. League/Div. _____
ADDRESS: _____	ZIP: _____	
E-Mail Address: _____		
<b>Assist. Capt.</b>	PHONE: _____	Prev. League./Div. _____
ADDRESS: _____	ZIP: _____	
E-Mail Address: _____		

**Team Registration Fee MUST accompany this roster, for it to be accepted.**  
**FALL 2017 REGISTRATION FEE: \$150.00 PER TEAM & MEMBERSHIP FEE: \$15.00 PER MEMBER**  
 Registration and Membership Fees Non-refundable. A \$25 fee will be charged for bank returned checks!!!!  
 Fall Rosters require a minimum of six (6) players and a maximum of nine (9) players.  
**All Players MUST be 21 years of age or older to play.**

ROSTER MAIL IN DEADLINE:	THURSDAY	July 12th	
ROSTER TURN-IN MEETINGS:	THURSDAY	July 12th	7:00 PM at Hebert's Restaurant
CAPTAINS MEETING:	THURSDAY	August 16th	7:00 PM

**Each team must send a representative (player from their roster) to the Captains meeting or they will receive a one point penalty**  
 FALL 2017 SEASON BEGINS WEDNESDAY August 22th 7:00 PM

3. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

4. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

5. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

6. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

7. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

8. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

9. \_\_\_\_\_ PHONE: \_\_\_\_\_ Prev. League/Div. \_\_\_\_\_  
 E-Mail ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

## Seacoast Dart Association, Inc.

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 Web Site: [www.seacoastdart.org](http://www.seacoastdart.org)