



**HOWARD COUNTY DART ASSOCIATION
TEAM ROSTER
Spring 2016 Season**

Division: A, B, C, D

Requested Bar: 1st _____ 2nd _____ 3rd _____

CAPTAIN: _____ TEAM NAME: _____

Captain Email: _____ Captain Phone Number: _____

PLEASE COMPLETE (PRINT) FOR EACH TEAM MEMBER.

Player Name: _____

Amount Paid: _____ Cash _____ Check # _____

Player Name: _____

Amount Paid: _____ Cash _____ Check # _____

Player Name: _____

Amount Paid: _____ Cash _____ Check # _____

Player Name: _____

Amount Paid: _____ Cash _____ Check # _____

Player Name: _____

Amount Paid: _____ Cash _____ Check # _____

Team Fee: \$ 24.00 per player,
plus HCDA members annual fee \$ 12.00 per player (If not an annual member yet.)

Payment due at sign-up

All Roster members **MUST** be HCDA members. Please make all checks
Payable to: Howard County Dart Association (HCDA)
A Returned check fee will be charged for all dishonored checks.