

P.R.O. REGISTRATION FORM

Team Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

Fax _____

Contact Name _____

Contact Phone: _____

Email: _____

Squad Type: NFL NBA AFL WNBA IFL NBDL Other _____

Number of Team Members Attending: _____

Names of Attending Members

Mail to:

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Or Fax to: 1-866-303-7763



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