



Print Legibly!

Team ID _____

Varsity _____ JV _____ Risers _____

Name of team _____ Locality _____

Contact Name _____ e mail _____

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ - _____ - _____ Fax _____ - _____ - _____

★ Cell Phone _____ - _____ - _____ Work Phone _____ - _____ - _____

★ Absolute necessity

Mail THIS form & ALL athlete waivers together by 1/6/11

Please send TOP portion ONLY!

Submit ALL waivers by 1/6/2011



SYNAPSE
SPORTS

300 Unity Lane Annapolis, MD 21401

Empire Polo Club

January 15-16, 2011



scorcher.