

Laramie County Indoor Wiffleball League
Entry Form

Team Name Alternate Team Name

Team Captain/Team Parent Phone Number of Team Captain/Team Parent

TEAM SPONSOR (Person or entity submitting entry fee for team) Checks will be made payable to winning teams sponsor.

Sponsor Name Sponsor Phone Number

Sponsor Mailing Address, City, State, Zip

Teams are designated by division. Competition order will be based on completed entry submission order. Entry fees are non-refundable. All team members must provide a completed **Release, Waiver and Indemnity Agreement**. All minor children under the age of 18 require parental consent to participate. **To qualify as ENTERED the following must be submitted together- Entry Form, Entry Fee and Waivers signed by each participant.** No exceptions will be made.

REGISTRATION FEE & LEAGUE INFO

Fee: \$100 per team
Season: 10 games played over a 5-week season. Games played on Tuesday nights.

TEAM ROSTER

4 team members REQUIRED & 2 alternates recommended. Alternates will only participate if a team member is unable to participate.

Participant Name	Age	Waiver v
1. Team Captain-		
2.		
3.		
4.		
5. Alternate #1-		
6. Alternate #2-		

Entry Forms, Fees & Waivers must be turned into the Laramie County Events Office ONLY

3801 Archer Parkway, Cheyenne, WY 82009

For Office Use Only	Date received completed
Entry Form Received _____ Waivers Received _____	_____
Entry Fee \$ _____ Cash _____ Check # _____	Team Name _____