

PIONEER VENDING TEAM ROSTER

TEAM NAME: _____

CAPTAIN'S NAME: _____

List players and **FILL OUT ALL INFORMATION**

- ❖ \$21.00 – First league for 2024-2025 Season.
- ❖ \$ 4.00 – Played league for a different Vendor for 2024-2025 Season (list League/Vendor name).
- ❖ \$ 1.00 – Played Pioneer Vending league for 2024-2025 Season. (list League Name).

Player's Name _____ Street Address _____
Email _____ City/State _____
Cell Phone _____ Date of Birth _____
Ok: Use my image online _____ Sanction paid: \$ _____ Vendor/League _____
BCA Player # _____ BCA Sanctioned 2024 Y/N _____

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Cell Phone _____ Date of Birth _____
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