



2nd Annual Champions Trophy Vallamkali

co-hosted by
Tampa Bay Boating Association, Inc (TBBA) ,Malayalee Association of Central FL

REGISTRATION FORM

Team Name: _____

Name of Team Manager: _____

Name & Address of Captain: _____

Telephone: (Home/Work) _____ (Cell) _____ Best time to call in EST: _____

Email address: _____

Fax Number: _____

Color of T-shirt / Uniform: _____

Team City: _____

Check or Money Order # _____ (\$250 per team. maximum of 25, minimum of 16 members/team) payable to Tampa Bay Boating Association, Inc and mail to:

Jolly Mathew
1202 GOLF MEADOW BLVD,
VALRICO, FL 33596

call 813-719-0303, 813-334-0123 or 813-505-5033 with any questions

I/we hereby acknowledge and understand the rules and regulations of TBBA and we agree to abide the rules and regulations of TBBA

Signature of the Captain: _____ Date: ___/___/2009

For TBBA Official use only

Paid by: Cash Check (check # _____) other

Amount: \$ _____

Eligibility Verified by: _____

Signature: _____ Date: ___/___/2009