

## **REGISTRATION FORM**



PLEASE WRITE CLEARLY

## MAIL THIS FORM, ROSTER, HOTEL INFORMATION FORM AND CHECK TO:

## BILLS YOUTH ASSOCIATION 3700 HEMINGWAY DRIVE CHATTANOOGA, TENNESSEE 37406

TRIP CONTACT NAME				
PHONE HOME	CELL#	*E-MAIL		
MY TEAM WILL ARRIVE:	FRIDAY NIGHT		SATURDAY	MORNING
(WE MUST HAVE AN EMAIL ADDRE	SS TO SEND INFORMATION RE	GARDING THE BOWL G	<u>GAMES)</u>	
<u>COACH INFORMATION</u>				
TEAM NAME			A	GE
HEAD COACH NAME				
CITY		STATE	ZIP	
PHONE	CE	CELL#		
*E-MAIL				
AGE GROUP: 6U 7U 8 (CIRCLE ONE)  * This year we have two 10U teal	ms. One 10U team has a cuto	off date of May 1. The	e second 10U cu	ntoff is July 1.
NOTE: REGISTER BEFORE OCTOBER S				
REGISTRATION				
Friday - November 29, 2024 from 5 School. Games start at 9:30 AM of				East Ridge High
FOR BYA USE ONLY  Date Registration Fee Receive	ed: Date R	egistration Forms l	Received	