

Lancaster Recreation Commission

20__ League

Name of Team _____

	Name	Address Street City, Zip	Residency			Daytime/Evening Telephone
			Lanc City	Lanc Twp	Other	
1	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
2	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
3	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
4	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
5	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
6	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
7	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
8	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
9	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
10	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
11	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
12	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
13	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
14	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
15	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
16	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
17	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____
18	First: _____ Last: _____	St: _____ _____, _____				D: _____ E: _____