Georgia / North Florida Tennis League



A League Sub Registration Form

Name:	NTRP Rating:	
Address:	City:	Zip:
Phone Number: Home:	Cell:	
Email Address:	Contact by: H	W C Email
May we list your phone number on our Leagu	ue website: Yes	No
May we list your email address on our Leagu	ne website: Yes	No
Last Postion Played Last Win/Loss Re	ecord	
Win/Loss at higher position # W/L (You will be placed at the appropriate sub p Will you play for any team? Yes No	position by the sub co	
Are you willing to go out of town for matche Any additional information: Position requested Please list your tennis history so the sub Com		
Complete this form and send with check for State of play. Your information will not be pronotified of your position placement by the subcontacting sub committee chairman if you has	ocessed without a ch	neck and the form. You will be nay inquire about your position by
*Regular B Team players DO NOT have to	pay the \$5 Fee	
Make checks payable to: Janie McFarla	ain_	*
Mail to: Janie McFarlain, 1302 Betton	Road, Tallahassee	e, FL 32308
Approved to play at position Date: Date:		