

# 2014 TEAM AGREEMENT & COMMITMENT FORM

## TEAM CONTACT INFO

Official Team Name: \_\_\_\_\_

Team Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Team Mailing Address: \_\_\_\_\_

Team Official Website: \_\_\_\_\_ Team Fax: \_\_\_\_\_

\*Would you like to receive updates VIA Text Messaging? YES or NO?

## Team Representative:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*Would you like to receive updates VIA Text Messaging? YES or NO?

## Team Representative:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*Would you like to receive updates VIA Text Messaging? YES or NO?

## FINANCIAL INFORMATION

Name of Responsible Payee: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mail the completed form and Annual Dues to:  
Women's Premier Soccer League  
4041 American River Dr. Sacramento, CA 95864