

HWSA TEAM Registration Form
Registration and full payment DEADLINE is January 31, 2020



Please write legibly!

Team Name: _____ City, State _____

Team Website: _____

Head Coach (required): _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _(_____) _____ Cell Phone: _(_____) _____ Business Phone: _(_____) _____

E-mail Address: _____

Assistant Coach (required):

Name: _____ Cell Phone: (_____) _____

Team Admin Contact (OK to be Head Coach or Assistant Coach):

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _(_____) _____ Cell Phone: _(_____) _____ Business Phone: _(_____) _____

E-mail Address: _____

Please fill out all requested information above and sign this form. Also include the full **\$900 team fee**—payment in full must be postmarked by January 31, 2020. Make checks payable to: HWSA and mail this form and your check to the HWSA Administrator below.

I have carefully read and understand the HWSA Rules and agree to adhere to the rules and policies of the Homeschool World Series Association. I also understand that it is important to HWSA that our team find housing accommodations during the tournament IN POLK COUNTY, FLORIDA, and that the team registration fee is non-refundable.

X _____ Date: _____
Head Coach's Signature

HWSA Administrator
620 Dumont Dr.
Richardson, TX 75080

HWSA will provide a tournament t-shirt for 3 coaches.
Please indicate the sizes of the 3 shirts for your coaches:
1 _____ 2 _____ 3 _____
(S, M, L, XL, 2XL)