This application is a 3 part form: Check Off as Completed

Application for Team Registration

	 ☐ Team Registration Form (front and back) ☐ Gave Sponsor a copy of Contract/Invoice ☐ Included NCDA's copy of Contract/Invoice
until all the required information is received. B. Submit this fully completed form, along Secretary either prior to (best), or at the Application may be submitted by: Mail: NCDA Secretary PO Box 291 Casper, WY 82602-0291 NCDA Drop Points: the VFW @	orms – Your Team and Team Members <i>are not registered</i> , seived by the NCDA Secretary. g with the required \$50.00 Sponsor Fee to the NCDA
Division: □ AA □ A □ B	
Team Name:	Sponsor's Name:
Season for which applying: Year	
Captain's Name:	Phone Number: (
Email Address: ☐ Use email address. ☐ Set me up with an NCDA "E	
Whatever:	@NCDAdarts.org
Mailing Address Street:	Apt/Unit
City:	State: Zip:

>>>>> Complete Back/Next Page 2 of Application <<<<<<

PO Box 291, Casper, WY 82602-0291

www.NCDAdarts.org

Co-Captain's Na	ame:	Phone Number: ()		
•		Do you use text messaging?		
		as my contact email address.		
		@NCDAdarts.org		
Mailing Address	Street:	Apt/Unit		
	City:	State: Zip:		
Team Member	'S Name:	Phone Number: <u>()</u>		
	our Phone # on the Public Roster? Yes No	Do you use text messaging? $\ \square$ Yes $\ \square$ No		
Email Address:	Use@	as my contact email address.		
	Set me up with an NCDA "Email for Life": Whatever:	@NCDAdarts.org		
Mailing Address		Apt/Unit		
	City:	State: Zip:		
May we publish yo Email Address: Mailing Address Team Member May we publish yo Email Address:	Set me up with an NCDA "Email for Life": Whatever: _ Street: City: 'S Name: our Phone # on the Public Roster? Yes No Use@	Do you use text messaging? as my contact email address. @NCDAdarts.org Apt/Unit State: Zip:		
Mailing Address				
ivialiling Additess	Street:City:			
	'S Name:	Phone Number: ()		
May we publish yo	our Phone # on the Public Roster? Yes No	Do you use text messaging? $\ \square$ Yes $\ \square$ No		
		as my contact email address.		
		@NCDAdarts.org		
Mailing Address	Street:	Apt/Unit		
	City:			
Signature of Te	eam Captain	Date application submitted:		
		Date received by Secretary:		

Sponsor / NCDA Agreement and Invoice (NCDA's Copy – turn in with Application)

Name of Sp	onsor's Business:			
The Team of		requests you're	kind Snonsorshin of thei	r Steel Tin Darts Team
for the Year_ on the Team.	, Season (w	inter, Summer, Fall)	. We have	Members registering
•	consorship is \$50.00 per s Ensure that the NCDA so games, with the others l Sponsor of scheduling cl	chedules half of all thei being away games and	r matches in the Sponso	
>	Not enter the Sponsor's establishment) and/or d Conduct themselves in a of the NCDA and Sponso	Irinks of any kind. a courteous and sports or. Excessively loud, fo	man like manner at all tii	mes as representatives r is subject to
=	oring Business agree to: I se of conducting a weekly		oment and space in acco	rdance with NCDA rules
Both undersig between eithe	ned parties agree to the er parties.	provisions as cited abo	ve and that this agreeme	ent is non-binding
INVOICE				
☐ I am subm	itting \$50.00 🔲 Cash	☐ Check at this time	e. Team Rep initial here	when received
	mit a request for approva t time possible (We ask no		-	
_	Business' Representative	:		te:
Signature of 1	Team Representative:		Da	ate:

>>>> Now Fill Out the Last (Page 4) NCDA's Copy <<<<

Sponsor / NCDA Agreement and Invoice (Sponsor's Copy – give to Sponsor)

Name of Sp	onsor's Business:		
	Address:		-
The Team of:	requests you're	kind Sponsorship of their	Steel Tip Darts Team
for the Year	, Season (Winter, Summer, Fall)	We have	Members registering
on the Team.			
The cost of Spc	onsorship is \$50.00 per season, for which the NCDA a	grees to:	
>	Ensure that the NCDA schedules half of all their mat the others being away games and make every reaso changes.	•	
And the Team	_		
>	Not to enter the Sponsor's establishment with food and/or drinks of any kind.	(except if none are provid	ed by your establishment)
>	Conduct themselves in a courteous and sportsman NCDA and Sponsor. Excessively loud, foul, or obnox NCDA in accordance with Association By-Laws.		The state of the s
•	ring Business agree to: Provide adequate equipment ducting a weekly darting competition.	and space in accordance v	vith NCDA rules for the
Both undersign parties.	ned parties agree to the provisions as cited above and	I that this agreement is no	n-binding between either
INVOICE			
☐ I am subm	itting \$50.00 ┌ Cash ┌ Check at this time	. Team Rep initial here v	when received
the above amo	mit a request for approval of funds disbursement bunt to cover the seasonal entry fee of \$50.00 per Tea 602-0291 and must be submitted within fourteen day	am. Fees shall be mailed to	: NCDA, PO Box 291,
Signature of E	Business' Representative:	Da	te:
_	Feam Representative:	Da	

>>>> You're Done! <<<<