



G-DARTS GZ REGIONAL LEAGUE



OFFICIAL TEAM REGISTRATION FORM _____ LEAGUE

Must be fill/必須填寫

Date 日期: _____ DD/MM/YYYY

Team Name 隊伍名稱: _____ # Previous Division 上屆組別: _____

Home Venue 主場名稱: _____ # Telephone 電話: _____

(Note all teams applying must have a home venue 所有隊伍必須登記一個主場)

Address of Venue 主場地址: _____

Captain's Name 隊長名稱: (In Full 全名) _____ 中文(_____)
Vice Captain's Name 副隊長名稱: (In Full 全名) _____ 中文(_____)

G-DARTS Membership No. 會員編號: _____ # G-DARTS Membership No. 會員編號: _____
I.D. No. 身分證號碼: _____ I.D. No. 身分證號碼: _____

Address 聯絡地址: _____ # Address 聯絡地址: _____

Mobile Phone 手提電話: _____ # Mobile Phone 手提電話: _____

Email Address 電郵地址: _____ # Email Address 電郵地址: _____

LIST OF ALL PLAYERS : (所有隊員名單)

#	<u>Surname</u> 姓氏	<u>Givenname</u> 名字	<u>Alias</u> 英文名	<u>Chinese Name</u> 中文名	<u>Email Address</u> 電郵地址	<u>G-DARTS No./ I.D. No.</u>
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____

Captain's Signature 隊長簽名: _____