

CODE:



TEAM REGISTRATION

[illegible]

1 Signature	TEAM MANAGER	3 ASSISTANT COACH	CHOICE OF UNIFORMS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%; text-align: center;">1</td> <td style="width: 90%;"></td> </tr> <tr> <td style="text-align: center;">2</td> <td></td> </tr> <tr> <td style="text-align: center;">3</td> <td></td> </tr> </table>	1		2		3	
1									
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2 Signature	HEAD COACH	4 DOCTOR ID	THIS FORM MUST BE PRESENTED BY THE TEAM TO THE NORCECA DELEGATE DURING THE PRELIMINARY INQUIRY						
		5 PHYSIOTHERAPIST ID							
		6 TRAINER ID							
		7 JOURNALIST/ STATISTICIAN							
		8 SUPPORT STAFF							
		9 SUPPORT STAFF							