

**JHSASN REGISTRATION FORM  
TEAM/PLAYER**

Once you complete & submit the form, a member of JHSASN staff will contact you. Completion of the form does not guarantee your spot however; your team will be listed as a first come first serve HOLD status until full registration payment is made. Full payment must be made 4 weeks before the tournament begins. Any questions contact us at: [alumni@jhsasn.com](mailto:alumni@jhsasn.com) Team contact # will be listed on JHSASN website ([www.jhsasn.com](http://www.jhsasn.com)) for players who are seeking to represent their High School.

NAME OF HIGH SCHOOL TEAM: \_\_\_\_\_

NAME OF TEAM ORGANIZER: \_\_\_\_\_

NUMBER OF PLAYERS: \_\_\_\_\_

DAYTIME PHONE: \_\_\_\_\_

EVENING PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ZIPCODE: \_\_\_\_\_

STATE: \_\_\_\_\_

NAME OF ALUMNI ASSOCIATION: \_\_\_\_\_

ALUMNI CONTACT: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_