Pool Regular Players Season Pre-Pa Pre-payment must be paid for the whole team for the		Dana
Date:	Leagles	UKKStar
League:		No. of the last of
Team:		
Captain:	2.	Crass
League Dues: Sanction Fees: G/L # 22334-0	KONA	
Phone Number:	·Liquid Aloha:	MONOOO UIR
Amount: \$		
Check Number:		
Name on Check:		
For payment to be accepted it must come or mail it to 2207 7 th St NW Rochester, MN	•	drop it off at the office
Pool Regular Players Season Pre-Parer-payment must be paid for the whole team for the Date:	yment Form (8)	D&R Star
League:		
Team:		
Captain:		Crah
League Dues: Sanction Fees: G/L # 22334-0	KONA	
Phone Number:	· Liquid Aloha:	Alomood Office
Amount: \$		

For payment to be accepted it must come to D&R Star directly. You may either drop it off at the office or mail it to 2207 7th St NW Rochester, MN 55901

Check Number:

Name on Check: _____