P.O. Box 5435, Station B
1625 Fort St, Victoria
British Columbia, Canada, V8R 6S4

Team Name:_____

Venue:_____

Division:_____

Team Registration Form

(Please print clearly)

	Last Name	First Name	Phone #	Address	City	Postal	E-Mail	Join Darts BC
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								
13								
14								
15								