(for WOBA League Teams only)

Local:	Division	Division:	
Team Head Coach:	Telephon	e:	
Email:			
Team Manager:	Telephon	Telephone:	
Email:			
WOBA League Year-End Champi If eligible, our team wishes to partic Our team does not intend to partic	icipate in the League's Champions		
Team Representative Signature Note: This form must be submitted to the WOBA meeting will not participate in their respective year	-	Date o not submit a form by the July BOD	
Teams who withdraw after the tournament schedule has	s been published are subject to fines. WOBA	Rule Appendix 1, 3(a)	