



Greater Ottawa Super Singles Dart League Registration Form

Contact Information: (please print clearly)

Name	
Home Phone	
Work Phone	
Home Address	
Cell Phone	
Other Phone (optional)	
Email Address (optional)	
Sponsor Name and contact information	

League Information:

Division	
Dues	
Payment Received	
Payment Received by	
Date	
Notes	

*Privacy Notice: All personal information collected on this form is for the exclusive use of the GOSSDL for administration purposes and will not be unreasonably disclosed without obtaining consent from the member listed above.*

Signature: \_\_\_\_\_

Administrator Initials: \_\_\_\_\_