



**Isle of Palms Recreation Department
Men's 3 on 3 Basketball
Fall 2020**

Captain's Information

Name of Team: _____

Captain: _____

Address: _____

_____ Zip _____

Cell Phone: _____

E-mail: _____

- Cell # will be placed on schedules

Co-Captain: _____

Address: _____

Cell Phone: _____

Email: _____