

INTERMOUNTAIN



DIVISION

2015-2016 Team Registration Form

Club Name: _____

Address: _____

Phone Number: _____

Club email: _____

Program Director or Head Coach: _____

Email: _____

Business Manager/Administrator: _____

Email: _____

Instructions:

Please supply all of the correct contact information. On the back, please list all licensed coaches who will be traveling to WR/IMD quota races.

2015-16 IMD Club dues are \$30.00 prior to October 15 and \$60.00 after October 15th. Send payment and form to:

Intermountain Division
1775 W. State St. #343
Boise, Idaho 83702

