



Empowerment  
Squared

**Community Cup  
Team Registration Form**

Captain Name:  
Phone:  
Email:

Age:  
Gender: M/F

Team Name: \_\_\_\_\_

#	Name	Phone	Email	Gender (M/F)	Age
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

Please send completed form to 225 King William Street | Suite 217, Hamilton, ON. L8N 1B1

Online to [info@empowermentsquared.org](mailto:info@empowermentsquared.org)

Note: No team spot will be reserved until paid in full

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**Method of Payment Form**

Please make all cheques payable to Empowerment Squared or contact Leo Johnson (905-541-2509 or [leoonline@empowermentsquared.org](mailto:leoonline@empowermentsquared.org)) for payment in cash

Mail to:  
Empowerment Squared  
225 King William Street | Suite 217  
Hamilton, ON  
L8R 1B1

- Here is my TEAM registration payment
- Here is my INDIVIDUAL registration payment