NAS WHIDBEY ISLAND INTRAMURAL SPORT TEAM ROSTER

SPORT/LEAGUE: _____

TEAM NAME: _____

COACH and CONTACT INFO:_____ (REQUIRED)

ASSISTANT COACH and CONTACT INFO: _____ (REQUIRED)

LAST NAME	FIRST NAME	RATE/RANK	COMMAND	HOME #	WORK #	EMAIL

ALL FIELDS MUST BE FILLED OUT.

Please return to the NAS Whidbey Island Fitness Center's Sports Office or Front Desk by the advertised deadline.

NAVY Fitness

360-257-4320/2420

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