



PO BOX 7061
Hillsborough, NJ 08844
president@hillsboroughdukes.com

Dukes Referral Form

Referral Guidelines

1. To refer a potential Duke, please complete this form and return it, including the prospective athlete's name, guardian name, and contact information, to a Hillsborough Dukes Board member.
2. You are eligible for a referral award only when you refer Non-Existing Dukes families.
3. You will receive your "Dukes Dollars" after the new Duke has completed and paid for their registration.
4. For accounting purposes, new Dukes will receive their "Dukes Dollars," upon completion of their registration and confirmation of who referred them to the program.

Duke Information

Duke's Name: _____ Date: _____
Guardian Name: _____ Home Phone: _____
Email: _____ Cell Phone: _____

Referral Information

Athletes Name(s): _____
Guardians Name(s): _____
Email: _____
Telephone: _____
Notes: _____

For Dukes Board Member Use Only

Date Received: _____ Received By? _____
Confirmed Registration? _____ Registration Date _____
Dukes Dollars Serial Numbers: _____