

South Central Girls Softball League

TEAM REGISTRATION for \_\_\_\_\_(town)

Age Division (circle one)

U10 U12 U14 U16 U18

Coach

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City/ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Home phone ( \_\_\_\_ ) \_\_\_\_\_

Second phone ( \_\_\_\_ ) \_\_\_\_\_ Cell Work (circle)

Email address \_\_\_\_\_

Assistant Coach

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City/ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Home phone ( \_\_\_\_ ) \_\_\_\_\_

Second phone ( \_\_\_\_ ) \_\_\_\_\_ Cell Work (circle)

Email address \_\_\_\_\_

Community Coordinator

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
City/ State \_\_\_\_\_

Zip Code \_\_\_\_\_

Home phone ( \_\_\_\_ ) \_\_\_\_\_

Second phone ( \_\_\_\_ ) \_\_\_\_\_ Cell Work (circle)

Email address \_\_\_\_\_

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For League use only

Fee paid by cash or check (circle one) \_\_\_\_\_ (initials)

Picked up Game balls \_\_\_\_\_ (initials)

Picked up ASA packet \_\_\_\_\_ (initials)