

# SUBURBAN GIRLS SOFTBALL 2020 REGISTRATION FORM



**AGE GROUP**  
PLEASE CIRCLE

**8U**

**10U**

**12U**

**14U**

**DIVISION**  
PLEASE CIRCLE

**SILVER**

**GOLD**

**TEAM NAME** \_\_\_\_\_

**TEAM MANAGER** \_\_\_\_\_

**COMPLETE ADDRESS** \_\_\_\_\_

**HOME NUMBER** \_\_\_\_\_ **CELL NUMBER** \_\_\_\_\_

**EMAIL (MANDATORY)** \_\_\_\_\_

**COMMUNITY REP NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**NOTES & FIELD AVAILABILITY** (Address, Nearest main intersection to field)

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**USSSA#** \_\_\_\_\_ **PD CHECK #** \_\_\_\_\_