

(Please Print Clearly and Complete All Information)

TEAM INFORMATION				
Team Name:				
Manager's First Name:		Manager's Last Name:		
Manager's Street Address:				
City:		State:	ZIP:	
Home Phone No.:		Cell Phone No.:		
()		League Name:		
PENNSBURY SHOWCASE TOURNAMENT ONLY				
DISTRICT		TYPE OF TEAM:		AGE GROUP:
<input type="checkbox"/> 1	<input type="checkbox"/> 9	<input checked="" type="checkbox"/> Fast	<input type="checkbox"/> Slow	<input type="checkbox"/> 18/Under
<input type="checkbox"/> 2	<input type="checkbox"/> 10	<input type="checkbox"/> Boys	<input checked="" type="checkbox"/> Girls	<input type="checkbox"/> 16/Under
<input type="checkbox"/> 3	<input type="checkbox"/> 11	Does your League/Team offer USA Softball Individual Registration?		<input type="checkbox"/> 14/Under
<input type="checkbox"/> 4	<input type="checkbox"/> 12	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 12/Under
<input type="checkbox"/> 5	<input type="checkbox"/> 13	Would you like information on USA's Softball Individual Registration and Insurance?		<input type="checkbox"/> 10/Under
<input type="checkbox"/> 6	<input type="checkbox"/> 14	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 8/Under
<input type="checkbox"/> 7	<input checked="" type="checkbox"/> 15			
<input type="checkbox"/> 8	<input type="checkbox"/> 16			
Junior Olympic Recreational Only Team Registration Fee: \$25				
Benefits of your Membership in the USA Softball of Pennsylvania include:				
1. Official USA Softball Participate Manual and Scorebook				
2. (1) League Plaque for every 10 teams registered in your League				
Deputy Commissioner:			Date:	
District Commissioner:			Date:	

Green Copy: State Office ~~~ Yellow Copy: District Commissioner ~~~Pink Copy - Team

Revised 12/2020