

USA SOFTBALL™ of Nevada

Adult Team Registration Application

Registration Fee: \$20

Team Name _____

Manager name _____

Purchasing Bollinger Tournament Insurance Yes No

Divisions of Play: Men Women Coed

Type of Play: Fastpitch Modified Slowpitch

Division: _____

Email _____

Address _____

City _____ State _____ Zip _____

Primary Phone _____ Alternate Phone _____

Roster of Players:

Name	Address	Classification
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____
8.	_____	_____
9.	_____	_____
10.	_____	_____
11.	_____	_____
12.	_____	_____
13.	_____	_____
14.	_____	_____
15.	_____	_____

Return completed form and Registration fee to:

USA Softball of Nevada
c/o Tony Pehle, Commissioner
1400 Baring Blvd.
Sparks, NV 89434