



ATHLETIC DIVISION

805 Central Avenue, Two Centennial Plaza
Cincinnati, OH 45202
(513) 352-4020 (513) 352-1605 FAX

League _____
Tournament _____

Awards Preference: Credit _____ or 1st Place Sponsor trophy & shirts _____ (18 awards max)

SPORT: SPRING SOFTBALL - 2009

CIRCLE ONE: MEN _____ COREC _____ WOMEN _____

TEAM NAME _____

Manager _____ Alternate Manager _____
Address _____ Address _____
City, State, Zip _____ City, State, Zip _____
Phone: (H) _____ (W) _____ Phone: (H) _____ (W) _____
[Cell] _____ {Cell} _____
E-mail address _____ E-mail address _____

Are you a new team? _____ Old team? _____ What league were you in last year? _____

What was team name? _____ What division? _____

Remarks: _____

1st Choice 2nd Choice 3rd Choice
Day _____ Day _____ Day _____
Location _____ Location _____ Location _____

FOR OFFICE USE ONLY

Method of Payment: Check/M.O. # _____ Cash MasterCard/VISA# _____

If Company check, name of company _____ Address _____

League Fee: _____

DEPOSIT TO: 323 197 2710 X X -----
(FUND) (AGENCY) (ORGANIZATION) (EXPENSE) (RPTG CAT)

(**NOTE: Any refunds will be payable to the maker of the check)