

2011 ELIZABETH SPANO MEMORIAL FAST PITCH AND COACH PITCH TOURNAMENT

ALL-STAR DIVISION

REGISTRATION

WE WOULD LIKE TO ENTER THE FOLLOWING TEAMS IN YOUR SOFTBALL TOURNAMENT:

CLASS/DIVISION	FEE	# OF TEAMS	TOTAL
Ages 8 & U	\$250		
Ages 10 & U	\$250		
Ages 12 & U	\$275		
Ages 14 & U	\$275		

TOTAL AMOUNT ENCLOSED: _____

MAKE CHECKS PAYABLE TO: TIPP CITY JR. BASEBALL, INC.

AGE CUT-OFF IS JANUARY 1ST FOR ALL DIVISIONS

Softball Organization:	
Address:	
City, State Zip	
Contact Person:	
Phone Number:	
E-Mail Address:	

Send Entries to Tournament Director:

Randy Myers
PO Box 201
Tipp City, Ohio 45371

Email Address: spanodirector@tcjb.org

All-Star Division Roster

Division: U8 U10 U12 U14 (Circle One)

Team Name: _____

Name	Address	DOB
1)		
2)		
3)		
4)		
5)		
6)		
7)		
8)		
9)		
10)		
11)		
12)		
13)		
14)		
15)		

I acknowledge that the above roster information is accurate and I am willing to provide proof should it be requested.

Coach's Name: _____ Signature: _____ Date: _____

League Official Name: _____ Signature: _____

League Position: _____ Date: _____