

BRUNSWICK COUNTY PARKS AND RECREATION

2012

COED SOFTBALL LEAGUE

REGISTRATION FORM

TEAM NAME: _____

TEAM MANAGER: _____

DAY PHONE: _____

MAILING ADDRESS: _____

EMAIL: _____

OTHER CONTACT: _____

DAY PHONE: _____

MAILING ADDRESS: _____

ZIP: _____

Please Answer the Following Questions:

1) What term best describes your team: Competitive Recreational

2) If three divisions are offered, what division would your team prefer to play in?

Division A Division B

(Please, refer to the league letter for division descriptions.)

3) Please check your preferred playing field(s). Please check all that apply. (If you don't have a preference, check two or all fields.)

Shallotte Lockwood Folly (Supply) Southport (Smithville)

4) Please provide any additional comments you may have.

COMMENTS:

ALL PLAYERS MUST SIGN THE ROSTER. PLAYERS ARE NOT ELIGIBLE UNTIL THEY HAVE SIGNED THE ROSTER. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE PARK AND RECREATION OFFICE AT (910) 253-2670.

ROSTERS MUST BE FILLED OUT BEFORE YOU PLAY YOUR FIRST GAME. YOU MAY ADD PLAYERS TO YOUR ROSTER THROUGH YOUR 4TH GAME PLAYED.

