Woodridge Spring Indoor Round Robin Warm Up Softball Tournament

Team Registration Form

□ 10U "A" Girls Travel Softball –□ 10U "B" Girls Travel Softball –	·			
Rate your team: B+ B B B E	3- □ C+ □ C			
Team Information				
Team Name				
Head Coach's Name/Contact				
Address(City	State	e	Zip
ome Phone Number Fax Number				
Cell Number * Majority of communication wil				
Payment Information The team fee is \$325 and must ac	company your ap	plication. Entry fe	es are	nonrefundable.
☐ Check No	Amount \$_			
☐ Credit Card Type (please chec	k): □ Visa □ Ma	asterCard		
Card Number		Exp/ _	\/	-
Cardholder's Name (Please Print)				
Signature				-

Return this form and payment to:

Woodridge Park District
Athletic Recreation Center (ARC)

Attn: Brad Keene 8201 S. Janes Ave. Woodridge, IL 60517

If paying by credit card, registration may be sent by fax to 630.353.3409.

