

***Iowa Amateur Softball Association
2002 Team Registration Form***

Team Name: _____

Manager's Name: _____

Mailing Address: _____

City, State, and Zip Code: _____

County Name/Number: _____

Email Address *(please write legibly)* _____

Daytime Phone (include area code): _____

Evening Phone (include area code): _____

Please Circle or show only the appropriate Registration Information:

Men's 12" Slow Pitch	Women's Slow Pitch	Co-Ed Slow Pitch
Men's Masters 35-Over Slow Pitch	Men's Masters 40-Over Slow Pitch	14/16" Slow Pitch
Men's Fast Pitch	Women's Fast Pitch	
Men's Masters 40 & Over Fast Pitch	Men's Modified Fast Pitch	

Junior Olympic Fast Pitch: *(please note that all Junior Olympic Teams that play in State Tournaments must use the Individual Registration Form – see Individual Registration Form)*

Girls	Boys			
10-Under	12-Under	14-Under	16-Under	18-Under

Registration Fees (must be returned with registration form)

**Send Checks and Registration information to: Iowa ASA, 1534 Penrose St., Grinnell, IA 50112
Or E-Mail Credit Card Registrations to cshutts@pcpartner.net or FAX to 641.236.6779**

Team Registration Fee	\$25.00
Shipping/Handling Fees	<u>\$4.00</u>
Total Enclosed	\$29.00

Master Card or VISA Credit Card # _____

Expiration date _____ **Name as it appears on Credit Card** _____

For District Commissioner Use Only:

District Commissioner Registration _____
District Commissioner Name

Office Use Only:

Date Received: _____

Check #: _____

Materials Shipped Date: _____