



# 2010

## ASA Men's A Fast Pitch National Championship Tournament July 29–August 1, 2010



Public Works Department  
Parks and Transportation Services Division  
555 Liberty Street SE/Room 325  
Salem OR 97301-3513  
503-588-6261

### TEAM REGISTRATION FORM

TEAM NAME \* \_\_\_\_\_ CITY \* \_\_\_\_\_ STATE \* \_\_\_\_\_

COACH NAME \* \_\_\_\_\_ CELL PHONE \* \_\_\_\_\_  
 ADDRESS \* \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 CITY, STATE, ZIP \* \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_  
 BEST PHONE # TO REACH YOU \_\_\_\_\_ FAX NUMBER \_\_\_\_\_  
 E-MAIL ADDRESS \* \_\_\_\_\_

#### BACKUP CONTACT

CONTACT NAME \* \_\_\_\_\_ CELL PHONE \* \_\_\_\_\_  
 ADDRESS \* \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
 CITY, STATE, ZIP \* \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_  
 BEST PHONE # TO REACH YOU \_\_\_\_\_ FAX NUMBER \_\_\_\_\_  
 E-MAIL ADDRESS \* \_\_\_\_\_

\* Required information in order to register team.

Dates: July 29–August 1, 2010 (3GG)  
 Location: City of Salem Wallace Marine Park Softball Complex  
 200 Glen Creek Road NW, Salem OR 97304  
 Entry Fee: \$380  
 Payment: Visa\*, Mastercard\*, Cash, or Check (make check out to City of Salem)  
 Return by: July 9, 2010  
 Mail to: City of Salem, Attention: Billy Powers  
 555 Liberty Street SE/Room 325, Salem OR 97301-3513  
 Director: Billy Powers bpowers@cityofsalem.net  
 Fax: 503-588-6025 Office: 503-588-6261

**For Office Use Only**

r #Cash \_\_\_\_\_

r #Visa/MC\* \_\_\_\_\_

r #Check # \_\_\_\_\_

r #Other \_\_\_\_\_

Cashier \_\_\_\_\_

\$ \_\_\_\_\_

Amount Paid

Date: \_\_\_\_\_

Time: \_\_\_\_\_

CONFIRMATION CODE



Registration forms and further information is available at [www.softballcityusa.com](http://www.softballcityusa.com).

*Thank You!*

*\*Use credit cards in person and provide photo identification.*