



2010

ASA Men's West Class C Fast Pitch National Championship Tournament July 28–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 28–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.

Thank You!

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