

Matanuska-Susitna Softball Association, Inc.

4900 Palmer/Wasilla Hwy Ste, 111 • Wasilla, Alaska 99654
(907)376-9050 • Fax: (907)376-9051 • www.matussoftball.com

Team Registration Form

Team name: _____

Sponsor: _____

Contact person: _____

Contact email: _____

Mailing address, city, zip: _____

Phone: Hm# _____ Wk# _____

Coach name: _____

Coach email: _____

Coach's Phone: Hm# _____ Wk# _____

Last year's team name: _____

Last year's classification:

Mens: <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>	D <input type="checkbox"/>	E <input type="checkbox"/>	Womens: <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>	D <input type="checkbox"/>	E <input type="checkbox"/>	Coed: <input type="checkbox"/>	B <input type="checkbox"/>	C <input type="checkbox"/>	D <input type="checkbox"/>	E <input type="checkbox"/>
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JO: _____

Number of returning players: _____ Win/Loss record: _____

For Association Use Only

Team name: _____

Amount received: _____

Date received: _____ Check number: _____

Person turning in entry and fee: _____

Team packet received by: _____

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