

SOUTH CAROLINA AMATUER SOFTBALL ASSOCIATION

TEAM REGISTRATION

TEAM NAME		CITY	
LEAGUE		CITY	

TEAM PROFILE	Please circle a number in each category listed below that applies to your team			
SEX	CLASS	DIVISION	AGE	
1 = ADULT MEN 2 = ADULT WOMEN 3 = ADULT CO-ED 4 = YOUTH BOY 5 = YOUTH GIRL 6 = YOUTH CO-ED	0 = LEAGUE 1 = SUPER 2 = MAJOR 3 = 'A' 4 = 'B' 5 = 'C' 6 = 'D' 7 = MASTERS 8 = SENIORS 9 = JO GOLD 10 = 'E'	1 = FAST PITCH 2 = SLOW PITCH 3 = MODIFIED 9 4 = MODIFIED 10 5 = INDUSTRIAL SP 6 = CHURCH SP 7 = 16-INCH SP 8 = SP. OLYMPICS 9 = BASEBALL	00 = ADULT 08 = 8-UN 10 = 10-UN 12 = 12-UN 14 = 14-UN 16 = 16-UN 18 = 18-UN 23 = 23-UN	35 = 35-OV 40 = 40-OV 45 = 45-OV 50 = 50-OV 55 = 55-OV 60 = 60-OV 65 = 65-OV 70 = 70-OV

CONTACT INFORMATION				Please print clearly and provide complete information			
NAME				RES:			
ADDRESS				BUS:			
CITY				MOB:			
STATE		ZIP		PGR:			
EMAIL				FAX:			

TEAM REGISTRATION FEE	NOTE
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\$30.00 – ADULT TOURNAMENT TEAM

REGISTRATION FEE MUST ACCOMPANY THIS FORM	
IF YOU HAVE ANY QUESTIONS PLEASE CALL	

TO BE COMPLETED BY THE ASA DISTRICT COMMISSIONER

FEE PAID		RECEIPT		DATE	
RECEIVED					REGISTRATION NUMBER
BY					