



Department of Environment,
Agriculture, Parks & Recreation

Orange County Recreation Adult Co-Rec Softball League *Team Registration Form*

TEAM NAME _____

SPONSOR (if you have one) _____

UNIFORM COLOR _____

NUMBER OF PLAYERS ON ROSTER _____

(All players must complete an individual registration/waiver)

CAPTAIN:

NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____ CELL PHONE _____

E-MAIL _____

PLAYERS:

| | FULL NAME | GENDER | DOB |
|-----|---------------------------|--------|-----|
| 1. | (Captain) | | |
| 2. | (Co-captain/Vice-captain) | | |
| 3. | | | |
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| 17. | | | |
| 18. | | | |

ENTRY FEE

DATE PAID _____ AMOUNT \$ _____ CHECK # _____ CASH _____