



P.O. Box 402 • Milford, Ohio 45150

BASEBALL LEAGUE REGISTRATION FORM

PLEASE PRINT CLEARLY

Team Name _____ Age Group _____

USSSA Team Insurance: (Please circle) Yes No Copy of policy must be given to Park prior to first practice or game.

Manager Information:

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address (Mandatory) _____

Asst Manager Information:

First Name _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail Address (Mandatory) _____

LEAGUE PREFERENCE:

1st Choice: Day _____

2nd Choice: Day _____

MANAGER ASSUMES ALL FINANCIAL RESPONSIBILITY FOR LEAGUE FEES

Make checks payable to: EXPRESSWAY PARK, P.O. BOX 402, MILFORD, OHIO 45150.

League positions are not guaranteed unless a league registration is accompanied by a minimum deposit of \$100 and all deadlines are met. Fees are non-refundable. \$30.00 & UP CHARGE ON ALL RETURNED CHECKS (Check Redit Charges on returned cks).

MANAGER'S SIGNATURE

(FOR OFFICE USE ONLY-DO NOT WRITE BELOW THIS LINE)

Table with 6 columns: DATE REC'D, CC/PER/CO CK#, RECEIPT #, AMT, DEP #, BAL. It contains six rows of blank lines for recording transactions.