



TOURNAMENT REGISTRATION FORM

*****E-Mail softball@totalsportscomplex.com to provide notice that you are mailing in a registration form with payment by check*****

TOURNAMENT: _____ DIVISION: _____ FEE: _____

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TOURNAMENT: _____ DIVISION: _____ FEE: _____

NAME OF TEAM: _____

DIVISION: _____

COACH/MANAGER: _____

This person will receive receipt, schedule, etc

PHONE #'S: _____

E-MAIL'S: _____

MAIL THIS FORM WITH CHECK MADE PAYABLE TO "TOTAL SOFTBALL" TO:

TOTAL SOFTBALL/TOTAL SPORTS COMPLEX
30990 S. WIXOM RD.
WIXOM, MI 48393

248-669-6754

softball@totalsportscomplex.com

