

MBSC Team Registration Form
Girls Fast Pitch Softball
8U, 10U and 12U Divisions

Community Information:

Community Name: _____

Community Contact Person: _____

Day Phone: _____ Evening Phone: _____ Cell phone: _____

E-mail address: _____
(Please make email legible, all communication will be done via email)

Team Information:

Team Name: _____

Enter this team in: 8U Division 10U Lower Division 10U Upper Division
 12U Lower Division 12U Upper B Division 12U Upper A Division

Coaches Information:

Coaches Name: _____

Day Phone: _____ Evening Phone: _____ Cell phone: _____

E-mail address: _____
(Please make email legible, all communication will be done via email)

Field Availability (must have a home field):

Night(s) home field will be available (**check one or more**): M T W TH
Fields must be available from 5 pm – 9 pm

Beginning Date: _____ Ending Date: _____

Field Street Address (for website map): _____

Comments: _____

1. Fill out one form for each team.
2. Enclose \$200 for each team (one check for multiple teams). Make checks payable to MBSC, Inc.
3. Send form by April 28th to

MBSC – Softball Coordinator
Tess Layman
234 Mark St.
Mason, MI 48854-1828

4. Turn in roster, signed by the coach and community coordinator to MBSC by May 31st.
5. Questions? E-mail Tess Layman, at MBSCsoftball@yahoo.com.