

NORWALK RECREATION & PARKS DEPARTMENT

2011 ADULT SOFTBALL REGULAR SEASON ROSTER

(FOR OFFICE USE ONLY)

BOND ISSUED:	AMOUNT PAID:	CHECK #	DATE:
LEAGUE ASSIGNED:	AMOUNT PAID:	CHECK #	DATE:

TEAM INFORMATION

TEAM NAME:	COACH:		
ADDRESS:	CITY:	STATE:	ZIP:
HOME PHONE:	CELL:	EMAIL:	
TEAM NAME LAST YEAR:	LEAGUE (LAST YEAR):		

LEAGUE INFORMATION:

PRIORITISE THE LEAGUES IN THE ORDER OF YOUR PREFERENCE.
1 BEING YOUR FIRST CHOICE, 2 BEING YOUR NEXT CHOICE ECT.

RATE YOUR TEAM: (CHECK ONE ONLY)

_____ MONDAY "D"	_____ FRIDAY "D"	_____ EXCELLENT
_____ TUESDAY "D"		_____ VERY GOOD
_____ WEDNESDAY "WOOD"		_____ GOOD
_____ WEDNESDAY "COED"		_____ FAIR

TEAM ROSTER

IF YES, PLEASE ENTER: L: LIVES, W: WORKS, HS: HIGH SCHOOL, P: PARENTS

NAME	RESIDENT	IF YES	HOME PHONE	BUSINESS PHONE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
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18.				
19.				
20.				

I HAVE READ THE BY-LAWS FOR THIS PROGRAM AND MY TEAM AND I WILL ABIDE BY THEM COMPLETELY.
I ALSO UNDERSTAND THAT BY NOT COMPLYING WITH THESE BY-LAWS AND ALL REGULATIONS SET FORTH BY
THE RECREATION & PARKS DEPARTMENT , MY TEAM AND I WILL LOSE OUR RIGHT TO CONTINUE IN THE PROGRAM
AND WILL FORFIET ALL LEAGUE FEES AND BONDS PAID TO THE RECREATION & PARKS DEPARTMENT.

COACHE'S SIGNATURE: _____ DATE: _____