

LIMA 50 AND OVER SOFTBALL LEAGUE

Registration

NAME (please print) _____

ADDRESS _____

CITY _____ ZIP _____

DATE OF BIRTH _____ PHONE _____

ARE YOU RETIRED OR STILL WORKING _____

IF STILL WORKING, WHO IS YOUR EMPLOYER _____

TEAM PLAYED ON LAST YEAR _____

BAT _____ THROW _____

POSITIONS THAT I PREFER TO PLAY (please list in order of preference)

1.) _____ 2.) _____ 3.) _____ 4.) _____

ADDITIONAL POSITIONS THAT I AM ABLE TO PLAY

1.) _____ 2.) _____ 3.) _____ 4.) _____

POSITIONS THAT I CANNOT PLAY

1.) _____ 2.) _____ 3.) _____ 4.) _____

SIGNED _____ DATE _____