

# Heart of America Senior Softball

## 2024 Softball Team Registration Form

Team Name: \_\_\_\_\_ # of Raytown Residents: \_\_\_\_\_

Manager: \_\_\_\_\_ phone(home): \_\_\_\_\_ work: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Assistant Manager: \_\_\_\_\_ phone(home): \_\_\_\_\_ work: \_\_\_\_\_

Monday/Tuesday 60+

Wednesday 50+ Silver and Bronze

	Player's Name	#	Address	City	ST	Zip
1						
2						
3						
4						
5						
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20						