



Baxter Sports Complex

P.O. Box 587

Fort Madison, IA 52627

(319) 372-2932

2019 CO-ED SLOWPITCH SOFTBALL REGISTRATION FORM

Please complete the following information and submit along with roster form and league fees.

Team Name/Sponsor: _____

Manager Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail Address: _____

Spring Season:

- Begins Thursday, April 25th
- **Registration Deadline:** Monday, April 15th

Summer Season:

- Begins Thursday, June 27th
- **Registration Deadline:** Monday, June 17th

Fall Season:

- Begins Thursday, September 12th
- **Registration Deadline:** Monday, September 2nd

Fees: 1 Season = \$250
2 Seasons = \$500
3 Seasons = \$700 (\$50 Team Discount)

FOR OFFICE USE ONLY

Date Received: _____ Amount: \$ _____ Check # or Cash: _____ Employee Initials: _____