



2010 Iowa Amateur Softball Association Team Registration Form

Team Name: _____

Manager's Name: _____

Mailing Address: _____

City, State, and Zip Code: _____

County Name/Number: _____ Email Address (*required) _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Please Check One of the appropriate Registration Divisions of Play:

- Men's 12" Slow Pitch [] Women's Slow Pitch [] Co-Ed Slow Pitch []
Men's Masters 35-Over Slow Pitch [] Men's Masters 40-Over Slow Pitch [] 14/16" Slow Pitch []
Men's Fast Pitch [] Women's Fast Pitch []
Men's Masters 40 & Over Fast Pitch [] Men's Modified Fast Pitch []

Junior Olympic Fast Pitch: (please note that all Junior Olympic Teams that play in State Tournaments must use the Individual Registration Form - see Individual Registration Form)

Girls [] Boys []

8-Under [] 10-Under [] 12-Under [] 14-Under [] 16-Under [] 18-Under []

Registration Fees (must be returned with registration form)

Send Checks and Registration information to: Iowa ASA, 1534 Penrose St., Grinnell, IA 50112
Or E-Mail Credit Card Registrations to cshutts@pcpartner.net or FAX to 641.236.6779

Team Registration Fee \$26.00
Shipping/Handling Fees \$6.00
Total Enclosed \$32.00

Master Card or VISA Credit Card # _____

Office Use Only:
Date Received: _____
Check #: _____
Materials Shipped Date: _____

Expiration date _____ Name as it appears on Credit Card _____ Sec. Code _____

FINISH AND SEND:

STEP 1: SAVE (SAVE AS) this report to your computer with an identifying name.
(example: jane-doe-asaregistration)

STEP 2: ATTACH YOUR SAVED FILE TO AN E-MAIL TO CATHY SHUTTS AND SEND TO
CSHUTTS@PCPARTNER.NET Or FAX to (641) 236-6779 Questions? Call: 641-236-5766