

**USA SOFTBALL OF NORTH DAKOTA LEAGUE REGISTRATION**

To be submitted by the League Representative or the District Commissioner

Choose the proper classification: \_\_\_ Slow Pitch \_\_\_ Fast Pitch \_\_\_ Coed \_\_\_ Women's \_\_\_ Men's

City or League Name: \_\_\_\_\_

**PLEASE TYPE OR PRINT**

1) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

2) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

3) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

4) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

5) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

6) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

7) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

8) Team Name: \_\_\_\_\_ City: \_\_\_\_\_ Classification: \_\_\_\_\_  
Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Manager's Address: \_\_\_\_\_

\_\_\_\_\_ Total MSP or WSP League teams @ \$65 per team \$ \_\_\_\_\_

\_\_\_\_\_ Coed, Fall, or Church League teams @ \$20 per team \$ \_\_\_\_\_

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

Send registration list & fees to: **JOHN DEHAAN, SEC./TREAS.**  
**USA SOFTBALL OF NORTH DAKOTA**  
**5504 47TH AVE S**  
**FARGO ND 58104**