

# FORSYTH COUNTY PARKS AND RECREATION

## ADULT SOFTBALL - COMMITMENT FORM

<b>LEAGUE OPTIONS</b> - Select one option in each box			
CATEGORY	LEAGUE	DIVISION	DAY
<input type="checkbox"/> Men's <input type="checkbox"/> Women's <input type="checkbox"/> Co-Ed	<input type="checkbox"/> Open <input type="checkbox"/> Church	<input type="checkbox"/> Equalizer <input type="checkbox"/> No Homerun	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday

**TEAM NAME:** \_\_\_\_\_

**MANAGER:** \_\_\_\_\_ **BIRTHDATE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**ASSISTANT MANAGER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**E-MAIL ADDRESS:** \_\_\_\_\_

**CHURCH ONLY – LIST CONFLICTING DATES:** Team will get the last game of the night for the dates listed

Spring revival dates: \_\_\_\_\_

Summer revival dates: \_\_\_\_\_

Bible school dates: \_\_\_\_\_

***By turning in money and this commitment form, I the undersigned, acknowledge that my team intends to participate and will not receive a refund under any circumstance. I have also received a team packet and will abide by all the rules and regulations set forth by the Forsyth County Parks and Recreation Department.***

**SIGNATURE REQUIRED:** \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>	
ENTRY FEE: _____	PAID BY: _____
DATE: _____	CHECK #: _____ RECEIPT #: _____
RECEIVED BY: _____	