



<b>Otago Softball Association</b> <b>T BALL ENTRY</b>	2009 / 2010
--	-------------

**ONE ENTRY per entry form**

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

CLUB / SCHOOL : \_\_\_\_\_

**Please enter our team in the age group indicated**

<b>5 &amp; 6 years <u>only</u></b>	<input type="radio"/>	<b>5 - 7 years</b>	<input type="radio"/>	<b>7 &amp; 8 years</b>	<input type="radio"/>
<b>Mixed age</b>	<input type="radio"/>	<b>8 &amp; 9 years</b>	<input type="radio"/>	<b>Experienced</b>	<input type="radio"/>

**COACH :** \_\_\_\_\_

CONTACT ADDRESS \_\_\_\_\_

DAY PHONE \_\_\_\_\_

A/H PHONE \_\_\_\_\_

**If an after hours contact number isn't provided, we will not be able to advise any late defaults etc.**

MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

Please include me on the email list to receive the weekly draw **YES / NO**

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

CONTACT ADDRESS \_\_\_\_\_

DAY PHONE \_\_\_\_\_

A/H PHONE \_\_\_\_\_

MOBILE \_\_\_\_\_

EMAIL \_\_\_\_\_

Please include me on the email list to receive the weekly draw **YES / NO**

*Register to receive text notification of a cancellation for your team*

Name ..... Mobile #

**ENTRIES CLOSE 2<sup>nd</sup> OCTOBER**

Please return entry forms to:-

Otago Softball Association Inc,  
P.O. Box 978,  
Dunedin 9054

**CODE OF CONDUCT - PTO**

Receipt of your entry will be taken as acceptance of the Junior "Code of Conduct"