



SLO-PITCH SOFTBALL
TEAM REGISTRATION FORM
JUNE 18-20, 2024: Brandon, MB

- **Registration Deadline is May 25, 2024.**
- Please ensure your team roster is complete, as no revisions are permitted after the deadline.
- One entry form per team (Alternatively, a printed roster will be accepted). Maximum number of players on a team is 20. There must be at least 1 woman on a team and at least 1 woman on the playing field at all times.
- Registration fees are non-refundable. Send registration form complete with payment to: **Active Aging in Manitoba (AAIM), 1075 Leila Avenue Wpg MB R2P 2W7**

Region: _____ Team Name: _____ Manager's Name & Phone #: _____ Manager's Email: _____ Coach's Name & Phone #: _____ Coach's Email: _____	<u>Registration Fee</u> Per Team <input type="checkbox"/> \$ 300.00 TOTAL amount enclosed: \$ _____	OFFICE USE ONLY <input type="checkbox"/> Credit card <input type="checkbox"/> Cheque #____ <input type="checkbox"/> Other Transaction Date _____
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Cheque: Please make cheques payable to AAIM

Credit Card: I authorize AAIM to charge my credit card for our 2024 MB 55+ Games registration team fee:

Signature: _____ Name on card: _____

Card Number: _____ Exp Date: Month ___/Year: ___ Security Code: _____

*Your credit card information is kept confidential, is never stored and will be securely processed by Square, one of the most secure and reputable payment processors available.

Name #1 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M___/D___/Y___
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Name #2 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M___/D___/Y___
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Name #3 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #4 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #5 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #6 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #7 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #8 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #9 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #10 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____
Name #11 _____ Address _____ Postal Code _____ Phone _____ Email: _____	<input type="checkbox"/> Male <input type="checkbox"/> Female <u>Birthdate</u> M____/D____/Y____

Name #12 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #13 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #14 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #15 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #16 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #17 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #18 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #19 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____

Name #20 _____
Address _____
Postal Code _____ Phone _____
Email: _____

Male
 Female
Birthdate
M____/D____/Y____