



Saturday, August 28, 2010
6th annual Aislen Cipro
Wiffle Ball Tournament

TEAM REGISTRATION

Team Name _____

Team Captain _____

Phone Number _____

e-mail _____

➤ Player #1 _____

➤ Player #2 _____

➤ Player #3 _____

➤ Player #4 _____

➤ Player #5 _____

➤ Player #6 _____

➤ Player #7 _____

Team registration fee of \$ 55 must be submitted on or before captain's meeting on August 24 at 7 p.m. in little league press box on Henry Street.

Checks should be made payable to Southbridge Little League

Submit form and fee to:
Aislen Cipro Wiffle Ball Tournament
c/o Southbridge Little League
P.O. Box 838
Southbridge, MA 01550