

**NORTHERN CALIFORNIA USSSA
2008 TEAM REGISTRATION FORM**

\$25 PER TEAM

(Please Type or Print all Information)

TEAM INFORMATION

Team Name: _____

Manager's Name: _____

Manager's Address: _____

City Zip Code

Home Phone: _____ Work Phone: _____ Email: _____

TYPE OF REGISTRATION

- Men's**
 - Major A B C D E

- Women's**
 - A B C D

- Other**
 - Armed Forces Black American Corporate
 - Church B Church C Hispanic
 - Mixed B Mixed C Mixed D
 - Youth Other _____

**Make check payable to California USSSA
Mail to 5372 Laurel Drive • Concord, CA 94521**