Member Benefits THE TOURNAMENT WILL BE PLAYED AT HALMICH F	NAME PARK, 3001 13 MILE RD., WARREN, MI.	ENTRY FORM NATIONAL SOFTBALL TOU Hosted by PRCUA Opole Dancers August 16-17, 2019 - Warren, MI CITY, ST	VRNAMENT 984 N 984 N CHICA or FRA ENTR FEES MAKE PRCU	D APPLICATION & JA FRATERNAL DE N. MILWAUKEE AV AGO, IL 60642 ATERNAL-DEPART RY FEE IS \$50.00 P ARE NON-REFUN E CHECK PAYABLE JA SOFTBALL OR I	PARTMENT VE. MENT@PRCUA.ORG PER TEAM. IDABLE. TO: PAY ONLINE AT				
MARK AN "X" IN THE SQUARE INDICATING IN WHICH DIVISION YOUR TEAM WILL PLAY:									
FRIDAY/AUGUST 16, 2019/6:00PM:CO-ESATURDAY/AUGUST 17, 2019/9:00AM:WOI	-ED DMEN'S OPEN		Form		Check enclosed Online payment				
EACH PLAYER MAY ONLY SIGN ONE ROSTEI	R. THE UNDERSIGNED MEMBERS D	DO HEREBY STATE THAT THEY ARE MEMBERS IN O	GOOD STANDING WITH THE PRO	CUA. PLAYERS AG	REE TO ABIDE BY THE				

EACH PLAYER MAY ONLY SIGN ONE ROSTER. THE UNDERSIGNED MEMBERS DO HEREBY STATE THAT THEY ARE MEMBERS IN GOOD STANDING WITH THE PRCUA. PLAYERS AGREE TO ABIDE BY THE PRCUA RULES AND REGULATIONS AND RULES OF GOOD SPORTSMANSHIP AND FAIR PLAY ON AND OFF THE FIELD. LOCAL SOFTBALL RULES APPLY IN THIS TOURNAMENT. EACH PLAYER MUST PERSONALLY SIGN HIS OR HER NAME TO THIS FORM.

AS MANAGER OR COACH OF THE ABOVE TEAM, I AM RESPONSIBLE FOR THE CONDUCT OF ALL PLAYERS AND THAT ALL THE INFORMATION ON THIS FORM IS CORRECT. I UNDERSTAND THAT IF ANY PLAYER'S INFORMATION HAS BEEN FALSIFIED FOR ANY REASON, ALL GAMES IN WHICH THAT PLAYER(S) PARTICIPATE WILL BE FORFEITED.

MAN	IAGER/COACH	ADDRESS	CITY	STZ	IPPHONE	E-MAIL	
	PRINT - PLAYER'S FULL LEGAL NAME	STREET ADDRESS	СІТҮ	ST ZIP	PHONE	E-MAIL	SOCIETY # ROSTER #
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CERTIFICATION OF MEMBERSHIP: ALL PLAYERS whose names are shown on the entry form need to be members of the PRCUA. Participation is limited to PRCUA members only. <u>ALL ENTRIES MUST BE RECEIVED BY FRIDAY</u>, AUGUST 2, 2019. Contact Information: Fraternal Department, 773-782-2636 or fraternal-department@prcua.org