

NORTH DAKOTA ASA LEAGUE REGISTRATION

To be submitted by the League Representative or District Commissioner

SLOW PITCH - FAST PITCH - COED - WOMEN'S - MEN'S  
(Circle proper classification)

CITY OR LEAGUE NAME \_\_\_\_\_

PLEASE TYPE OR PRINT

1. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

2. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

3. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

4. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

5. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

6. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

7. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

8. TEAM NAME \_\_\_\_\_ CITY \_\_\_\_\_ CLASS \_\_\_\_\_

MANAGER'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

MANAGER'S ADDRESS \_\_\_\_\_  
(Street) (City) (Zip)

\_\_\_\_\_ Total teams @ \$70.00 per team \$ \_\_\_\_\_

\_\_\_\_\_ League Coed Teams @ \$20.00 per team \$ \_\_\_\_\_

**Total amount enclosed** \$ \_\_\_\_\_

Send Registration list and fees to: GREG KAEDING, NDASA SEC. TREAS.  
2813 NORTH 10TH STREET  
FARGO, ND 58102