



**TUCSON PARKS AND RECREATION
2018 SPRING SLOW PITCH REGISTRATION FORM**



REGISTRATION DATES

MAIL IN February 5th-9th -Cannot be postmarked prior to February 5th - Mail to: Sports Office 8155 E Poinciana Dr., Tucson AZ, 85730 .

CALL/WALK/EMAIL IN February 14 – March 2 - M-F 9am-5pm, 791-4870, Sports Office 8155 E Poinciana Dr., sportsunit@tucsonaz.gov

Cost: \$293 League Fee + \$23 ASA Certification Fee = **\$316**

EAST –MEN’S			EAST - COED			WEST - MEN’S		
Men’s E -Monday	Golf Links 1	<input type="checkbox"/>	Coed E –Monday	Golf Links 2	<input type="checkbox"/>	Men’s E – Thursday	Mission Manor	<input type="checkbox"/>
Men’s E -Tuesday	Golf Links 1	<input type="checkbox"/>	Coed D –Tuesday	Golf Links 2	<input type="checkbox"/>			
Men’s E -Tuesday	Lincoln 6	<input type="checkbox"/>	Coed E –Tuesday	Lincoln 5	<input type="checkbox"/>	WEST - COED		
Men’s E -Wednesday	Golf Links 1	<input type="checkbox"/>	Coed E –Wednesday	Golf Links2	<input type="checkbox"/>	Coed E – Wednesday	Murrieta 1	<input type="checkbox"/>
Men’s D -Thursday	Golf Links 1	<input type="checkbox"/>	Coed E –Thursday	Golf Links 2	<input type="checkbox"/>	Coed E – Wednesday	Murrieta 2	<input type="checkbox"/>
Men’s E -Thursday	Lincoln 6	<input type="checkbox"/>	Coed E –Thursday	Lincoln 5	<input type="checkbox"/>			

**REFUNDS AFTER SCHEDULE IS COMPLETED WILL BE SUBJECT TO A \$75.00 ADMINSTRATIVE FEE.
REFUND REQUESTS AFTER MARCH 5TH WILL NOT BE HONORED.**

TEAM REGISTRATION INFORMATION

Would you like your mailing address given out to non-city directors? Yes _____ No _____

Team Name: _____ Manager’s Name: _____ Previous Team Name: _____

Address: _____ City: _____ Zip Code: _____




Phone #: _____ Cell Phone #: _____ E-Mail Address: _____

PAYMENT DUE IN FULL AT TIME OF REGISTRATION

Please make check payable to: **City of Tucson**
Mail to: **Sports Office 8155 E Poinciana Dr., Tucson, AZ 85730**

*The office reserves the right to move teams up or down based on
Prior season record and win differentials*

Please be aware that we will take all the recognized holidays off.
Any questions please call 791-4870 or email the Sports Office
at sportsunit@tucsonaz.gov

Credit/Debit Card Type: (Circle Type)    CVC# _____

Credit/Debit Card #: _____ - _____ - _____ **Expiration Date:** _____

Name On Credit/Debit Card: _____

Cash: \$ _____ **Check:** \$ _____ **Check #:** _____

Date Received: _____ **Received By:** _____