



GRAND SLAM SUMMER SOFTBALL LEAGUE 2019

TEAM NAME: _____

AGE: 10U 12U 14U 16U

DIVISION: TRAVEL SELECT

TEAM COORDINATOR:

(All League Information, updates, bulletins, cancellations will be communicated through this contact)

Name	
Cell Phone	
Email	

HEAD COACH:

Name	
Cell Phone	
Email	

LIST OF PLAYERS:

	NAME	EMAIL ADDRESS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		

PAYMENTS:

TRAVEL: \$225 (1 NIGHT/WEEK)

SELECT: \$325 (2 NIGHT/WEEK)

CHECK OR MONEY ORDER TO: MANNINO'S GRAND SLAM USA

CREDIT CARD: PAY ONLINE AT WWW.GRANDSLAMINFO.COM OR

CALL 614-717-9934

RETURN PAYMENT AND REGISTRATION FORM TO:

MANNINO'S GRAND SLAM USA
6635 DUBLIN CENTER DRIVE
DUBLIN, OH 43017

QUESTIONS: 614-717-9934 OR EMAIL
MANNINOSGRANDSLAMUSA@GMAIL.COM