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Epsom
Auckland

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Senior Ground Registration Form

This form MUST be returned to the Association Office at the address above within 5 days of the played game. Failure to complete all necessary sections will result in the appropriate fine being imposed. If you fax, the original must follow in the post.

PLEASE PRINT CLEARLY

PART 1 – Game Details

Club		Game #	
Venue		Date Played	
Grade		Team (include colour designation / section)	

PART 2 – Player Details

First Name		Male	Female
Surname			
Address			
Email			
Home Phone #		Cell Phone #	
Signature <small>(Competition grades only)</small>		Date	

PART 3 – Club Secretary Sign Off

Signature		Date	
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Declaration: The information contained herein is used solely for the administrative purposes of Auckland Softball Association Inc as defined in the PRIVACY ACT 1993, and will not be passed on to an outside party without the written permission of the individual concerned.

ASA OFFICE USE ONLY			
Approved	Yes	No	Date Received
ASA #			Date Entered