

# 2022 NEW BERLIN RECREATION — ADULT SOFTBALL TEAM ROSTER

Managers: Return this completed form along with payment to the Recreation Department no later than 4 pm on March 25.

SPONSOR/ TEAM NAME: \_\_\_\_\_ MANAGER'S NAME: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ PHONE #: (CELL) \_\_\_\_\_ (SECONDARY): \_\_\_\_\_

DIVISION ENTERED:  MONDAY MENS  MONDAY CO-ED  TUESDAY GOLD  TUESDAY SILVER  WEDNESDAY MENS  WEDNESDAY SOCIAL  THURSDAY 35+  THURSDAY 45+

#	PLAYER NAME	PRIMARY PHONE #	EMAIL	DATE PD (Office Use)
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Manager's Signature: \_\_\_\_\_

Date: \_\_\_\_\_