

2025

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tep 1	Girls Softball Division - Team Information (one form per team)					
	League Name	е				
	Age Level (8U, 9U, 10U, 12U, 14U)  Manager Name  Manager e - mail  Manager Cell Phone  Manager Home Phone  Manager Work Phone					
	Web site for league					
	Web site for	league				
itep 2	Field Info	rmation:				
	Location of Park ( Please provide address)					
	Closest Majo	r intersection to your field				
ер 3	Select the season you want to play in 2025. Circle one		9 games + Memorial Day tournament		10 game season	
ер 4	Date	Can you play at home?	Time Restrictions of Home Games			
Same 1	April 13th	Yes or No		•		
Same 2	April 27th	Yes or No				
Same 3	May 4th	Yes or No		. ,		
Same 4	May 11th	Yes or No			Mother's Day	
Same 5 Same 6	May 18th May 25th	Yes or No		←	- Weekend of Memorial Day Tournament	
Same 7	June 1st	Yes or No		• `		
Same 8	June 8th	Yes or No				
Same 9	June 15th	Yes or No		<b>←</b>	Father's Day	
ame 10	June 22nd	Yes or No		•		
into Yea	ar End Playoffs	? (mid July)	Yes	or	No	
ould you be willing to play more then 10 games?					N-	
uld you b	e willing to pla	y more then 10 games?	Yes	or	No	
		eds to be submitted with ed on the certificate of Ins	_	n. Pleas	se list Chicagoland Sunday Baseba	ill
il registra	ation form and	c / o Anthor P.O. Box 533				

NO REFUNDS AFTER MARCH 15TH

Deadline for Registration and Fee is February 28th. Registration must be complete in order to be included in the schedule.