**EGG HARBOR TOWNSHIP**

**8th ANNUAL OVERIAN CANCER Sep 21 & 22, 2019**

**Tournament Registration Form**

**CONTACT INFORMATION**

Team Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Coach or Managers Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_\_\_\_\_\_\_ Zip Code \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **16U 18U**

**PAYMENT AND REGISTRATION**

Please make sure to fill in the appropriate team member sections above.

Please return this registration with money order or check made payable to Egg Harbor Township Youth

Softball (EHTYS). The fee is $575.00 10U-14U and $675.00 16U & 18U. All registrations are accepted on a space available basis. Payments are not refundable unless tournament is cancelled by EHTYS

Please send your registration and payment to **Egg Harbor Township Youth Softball, PO Box 1702,**

**Pleasantville, NJ 08232**. For more information send an email to EHTSOFTBALL@AOL.COM

All teams are required to bring proof of Insurance and copy of birth certificates to prove players

age if required. **EHT MUST BE NAMED AS A CERTIFICATE HOLDER AND ADDITIONAL**

**INSURED ON THE INSURANCE. 3515 BARGAINTOWN ROAD, EHT NJ 08234**