



Make Checks Payable to:
Thunder Softball
1080 NE Kathryn Street
Hillsboro, OR 97124
Entry Fee: \$425.00

2011 State Championship Team Registration Form

State Tournament: _____

Location: _____

Team Name: _____ *

Coach's Name: _____ *

Street Address: _____ *

City: _____ **State:** _____ **Zip:** _____

Phone Numbers: H: _____ **B:** _____ **Cell:** _____ *

Fax: _____ **Email:** _____ *

***Required information to register a team.**

Your preferred contact phone number: _____ *

Backup Contact Information:

Name: _____ *

Street Address: _____ *

City: _____ **State:** _____ **Zip:** _____

Phone Numbers: H: _____ **B:** _____ **Cell:** _____ *

Fax: _____ **Email:** _____ *