



West End Slo-Pitch Association 2006 Registration Form

Box 471 - 1027 Davie Street
Vancouver, BC, V6E 4L2

Contact Information

PLEASE PRINT CLEARLY

First Name:

Last Name:

Address: Apt:

City: Postal Code:

Phone #: Alternate #:

Email:

Additional Information

- Would you like your name and telephone number listed in a league wide phone list?** Yes No
If select "No" your name will appear on the phone list, but your telephone number will not be listed
- Do you want your batting statistics published in a league wide report?** Yes No
Batting statistics will be available to your team coach. If you select "No", your information will not be included in the league wide report
- Are you interested in volunteering to keep score for some games during the season?** Yes No
- How did you hear about WESA?** Returning Member Xtra West Web Site
 Friend Poster / Flyer Other

Player Information

- Please list 3 positions that you would like to play.
- Rate your comfort/skill level each on a scale of 1-10
(1 = no comfort / skill • 10 = extremely comfortable/highly skilled)

	Position	Comfort / Skill
1		
2		
3		

Division Choice

Which Division are you interested in registering for?

C Division D Division

- Registration fees are \$110 per player on or before March 31st - \$135 after March 31st
- More information is available on the divisions
- Please feel free to ask any further questions

Uniform Information

Please select the size of the uniform you would like.
 XXXL XXL XL L M S

Special Request

Players may request a "buddy" or friend that will be assigned to your team.

Players Name: _____

- Both players must register for the same division
- Players must request each other in order for the request to be met

Date & Sign

By signing below and making payment to WESA, you agree that there is NO REFUND for any fees paid

_____ Date

_____ Signature

Office Use Only

Amount Paid: _____

Payment Format: _____

Date Received: _____

Received By: _____