



Middle School Girls Softball Tournament Registration Form

"5th Annual Middle School Invitational"

Saturday September 25, 2009

Entry Fee: \$125.00

Middle School Name: _____

Coach: _____

Address: _____

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

Office Number: () - _____ **Home Number:** () - _____

Fax Number: () - _____ **Cell Number:** () - _____

Email Address: _____ **you will receive tournament information and schedule at this address:*

Please make check or money order payable to: ***City of Jackson***

Please mail check or money order along with this registration form to:

**West TN Healthcare Sportsplex
250 BancorpSouth Parkway
Jackson, TN 38305
Attn: Ricky Yates**

**Email: sportsplex@cityofjackson.net
Phone: 1-800-941-2416
www.jacksonsportsplex.com**

Limited to first 16 teams, first come - first pay basis.