



COUNTY OF MIDDLESEX
OFFICE OF PARKS & RECREATION

2015 PANCREATIC CANCER SOFTBALL TOURNAMENT APPLICATION

We agree to play games with only those players whose names appear on the roster on the reverse side on this application. We certify that all players represented hereon to be not less than 18 years of age. We further agree to play according to the rules and regulations as established by the Middlesex County Office of Parks & Recreation; we further agree that any violations of these terms may result in our disqualification from further league play for a period of one year.

Team Information (Please Print)

TEAM NAME _____

MANAGER _____

MAILING ADDRESS _____

DAYTIME PHONE _____

EVENING PHONE _____

E-MAIL _____

ASST. MANAGER _____

DAYTIME PHONE _____

EVENING PHONE _____

E-MAIL _____

FEES

SUGGESTED DONATION IS \$250.00 Per Team

Please write separate checks for each participant if you are in need of proof for a tax write off.

SPACE IS VERY LIMITED AND TEAMS ARE ACCEPTED ON A FIRST COME, FIRST SERVE BASIS ONLY.
TEAM APPLICATION AND PAYMENT ARE DUE AT TIME OF REGISTRATION.

Check or Money Order only payable to: "CINJ at RUF"
(RUTGERS CANCER INSTITUTE OF NEW JERSEY – RUTGERS UNIVERSITY FOUNDATION)

DEADLINE TO ENTER A TEAM IS MONDAY, JUNE 22, 2015.

Application, Roster and payment can be mailed to:
Middlesex County Office of Parks & Recreation
P.O. Box 661
New Brunswick, NJ 08903
Attn: Erin or Tracie

If you would like to drop it off in person, we are located at:
1030 River Road
Piscataway, NJ 08854
Attn: Tracie or Erin
Monday through Friday 8:30AM- 4:00 PM

FOR FURTHER INFORMATION PLEASE CALL 732-745-4484 or 732-745-4222

2015

MIDDLESEX COUNTY PARKS & RECREATION

PANCREATIC CO-ED SOFTBALL TOURNAMENT TEAM ROSTER (*PLEASE PRINT!!!!*)

TEAM NAME: _____

	FULL NAME (<i>LAST/FIRST</i>)	ADDRESS (<i>STREET, CITY, ZIP</i>)	PHONE
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