Invoice Senior Softball World Championships

Taurnamanti



rournament:	
Team name:	
City, State:	
Qualifying site:	
Manager's name:	
Submitted by:	
Street address:	
City, State:	
Phone (home): Pho	ne (cell):
E-mail:	

Complete this invoice and mail with check **OR** Email to: *info@seniorsoftball.com* and call office to enter and pay:

Senior Softball World Championships, Inc. 9823 Old Winery Place • Suite 12 Sacramento, CA 95827-1720

Team roster should accompany check and invoice. Final rosters are due 14 days before the start of the tournament.

Signatures of players on "Exhibit A" are duebefore start of the first game.