



Softball Tournament Registration Form (August 16-19, 2018)
(Please Print)

Team Name: _____
_____ Men's _____ Women's

Team Manager: _____

Manager Address: _____
Street Address

City, State, and Zip Code

Manager Phone : _____

Manager Email: _____

Team Fee: \$175

Registration Form and \$100 non-refundable deposit Due by August 3rd, 2018.
We will be accepting late Registration Form with an additional \$50 late fee which will
be due by August 10th by 8am.

The remaining balance will be due before your first game.

Checks should be made payable to: GACC
Please send them to the following address: PO Box 147, Reed City, MI 49677

For Office Use Only

Date Received:	Amount:	Check No:
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If you have questions please contact us at gaccredcity@gmail.com or
Jamie McCoy at 231-912-0175.

**Saturday night there will be a Home Run Derby