2018 Illinois Senior Olympics Presented by Health Alliance

Softball Team Roster Form

September 15th and 16th, 2018
Spartan Sports Park
7012 Iron Bridge Rd.
Chatham, IL

Deadline: August 24th
Cost: $350 Per Team
Max roster size: 20 players

Team Name: _____

Coach/Manager: _____

Address: _____

Phone: _____ Email: _____

Age Division (Based on youngest Player)

50+ 55+ 60+ 65+ 70+

Please Circle One

Name	Date of Birth	Shirt Size	Address (City, State, Zip)

Team Manager Signature: _____ Date: _____

Please note: Only one (1) Roster will be accepted per team. The Roster must include a copy of the enclosed **RELEASE FORM** signed by each player. **The deadline for completed registrations is Friday, August 24th.** Incomplete registrations will be returned. The team **Roster**, individual **release forms**, and **payment ($350 per team)** should be mailed together to: Illinois Senior Olympics, 701 W. Mason St., Springfield, IL 62702.