

**NORTH VERMILION
LADY PATRIOTS SOFTBALL TEAM**

Team Entry:

Team Name: _____

Shooter #1 _____ Phone: (____) _____

Email Address: _____

Shooter #2 _____ Phone: (____) _____

Email Address: _____

Shooter #3 _____ Phone: (____) _____

Email Address: _____

Shooter #4 _____ Phone: (____) _____

Email Address: _____

Individual Entry:

(You will be assigned a team at registration)

Name of Shooter: _____ Phone: (____) _____

Email Address: _____

Main Event: \$100 per shooter _____ # of Shooter _____ X \$100 = \$ _____

PLEASE note there will NOT be a credit card machine available!!

Please make checks payable to: **North Vermilion Softball**

Mail entry and payment to: **North Vermilion Softball**

P.O. Box 303

Maurice, LA 70555