

TOWN OF ONONDAGA PARKS & RECREATION

4834 Velasko Road, Syracuse, New York 13215

Phone: 315-469-3464 | Fax: 315-469-2816

SOFTBALL LEAGUE REGISTRATION

Team Name: _____

Team Captain: _____

Email: _____

Address: _____

Phone (Cell): _____

Choose league you are registering for:

Sunday morning Men's League

Saturday morning Co-Ed League



This form must be accompanied with a completed roster form, and a payment of \$310.00 (*includes refundable \$60 forfeit fee*) with cash, check or credit **NO LATER THAN August 27th, 2021**

Please make checks payable to: **Town of Onondaga**

FOR OFFICE USE ONLY:

League Fee: _____ Completed Roster: _____ Date Submitted: _____