

2023/2024 WECSSO INDOOR SLO-PITCH REGISTRATION FORM (PLEASE PRINT THROUGHOUT THIS FORM)

NAME	DATE OF BIRTH		
		Mo	ONTH DAY YEAR
ADDRESS(NUMBER & S	TREET) (CITY)	(POSTAL COI	DE)
TELEPHONE -home			
ALL REGISTRATION FOI ON A FIRST REGISTERED determined) has been reached.	O - FIRST PLAY B	ASIS. Once the max	ximum number (to be
WECSSO members pay \$140 and insurance).	.00- non WECSSO n	nembers pay \$165.0	0 (includes membership fee
Pay as you play (must be a W	ECSSO member) - \$	10/game.	
There will be either 4 or 5 ter Four teams - 11 players per te Five teams - 10 players per te fifth week off, as spares.	am (44 total) priority	will be given to W	
Please let us know if you are p Season runs FROM NOV. 7, 2			
ALL GAMES TUESDAYS 9 PLEASE MAKE CHEQUE O		OR 11:00 am TO 1	2:30 pm
MAIL THIS FORM AND YO Brian Adlam 3095 Stillmeadow Rd. WINDSOR ON N8R 1N2 PHONE # 226-348-5432 Email: b_adlam@hotmail.com ETRANSFERS ACCEPTED	1	gmail.com	
SIGNATURE	1	REGISTRATION D	ATF