



Jackson County Rose Festival

2009 Softball Tournament of the Roses

(Formerly the Rose City Tournament)

Sat., June 6

(See flyer for details)

Sponsored by:



TEAM REGISTRATION FORM

Team Name: _____

Team Manager: _____

Mailing Address: _____ City/ST/Zip: _____

Manager Phone: Day - _____ Night - _____

Contact Email: _____

Division: MEN WOMEN COED Please fill out one form for each team!

Division Options: UPPER LOWER

Sponsorship opportunities are available!!

Call Mark Raczowski for questions: 206-6701 or email racz4@yahoo.com

Make checks out to:

Jackson County Rose Festival

TIN: 23-7239457

Non-profit 501(c)4 organization

Mail registration form and payment to:

Mark Raczowski

2038 W. Coachlight

Jackson, MI 49201

OR drop off to Mark at Cooperstown Softball Complex

Office use Only:

Date Received: _____

Registration Fee (circle one): \$75 (if received before May 1) \$90 (if received on or after May 1)

Paid by: CASH CHECK: # _____