

## **2025 Registration Form**

## Players must turn 48 years of age or older during the calendar year.

Personal Information  * indicates required information for insurance purposes				
* Name				
* Address				
* Town / Ci	ty		* Postal Code	
* Home Pho	one		Cell Phone	
Email add	ress		* Date of Birth	
Preferred position (dd/mm/yy)				
Fees:	Date Payment Received		Fee	
	by Jan 1/25		\$235	
	after Jan 1/25		\$260	
	Includes shirt (to be returned after season), equipment, insurance, all permits, 2 tickets to year-end banquet			
Register:			(preferably) email form and e-transfer yment to MOFL at:	
	Bob Conrad jo 37-5730 Montevideo Rd., Mississauga ON L5N 2M4		nus@mofl.ca	
I agree to participate in the Milton Old Friends Slo-Pitch League at my own risk and hereby release MOFL, its executive, and all its members of all liability for any and all damages I might incur while participating in any or all league functions for the 2025 Season.				
Date Signature				
Grey area for league use only				
Date Receiv	red Received by _	Received by		Amount
E-Transfer/Cheque # Cheque Date				