



Township of Upper Moreland Department of Parks and Recreation

117 Park Avenue, Willow Grove, PA 19090-3274

(215) 659-3100 x 1039

Fax (215) 659-8899

Website: www.uppermorelandrec.com

ADULT SPORTS LEAGUE REQUEST FORM

Submit one request form for each team requesting entry. Please write legibly.

Today's Date: _____

1. League Requested (please circle):
Men's Slow Pitch Softball – Spring / Fall
Coed Slow Pitch Softball – Spring / Fall
Men's Touch Football - Fall
Coed Kickball - Spring / Fall
2. Team Name (as it will appear on the schedule): _____
3. Team Manager: _____ Manager's Date of Birth: _____
4. Manager's Address: _____
5. Manager's Phone number: (C) _____ (H if applicable) _____
Do you receive texts? Yes No
6. Team e-mail address: _____
7. Would your team prefer to play (circle one): Early Late No Preference
8. Did your team play last season? Yes _____ No _____
9. If yes, what was your team name and who managed your team? _____
10. **IF REQUESTING RESIDENCY RATE:** What % of players live in Upper Moreland Township? _____
OR What is the name and address of your sponsor? _____
11. **NEW TEAMS ONLY:** Name of 1 team that referred you to the league: _____
12. Any additional information: _____

**SAVE REGISTRATION TIME! CREATE YOUR ACCOUNT
ON LINE AT**

WWW.UPPERMORELANDREC.COM

For Office Use Only

Amount Paid _____ Date Paid _____ Roster Submitted _____ Date Submitted _____