

SUMMER RocSoftball Team Registration Form

Team Name: _____

Manager Name: _____

Manager Address: _____

City: _____ State: _____ Zip: _____

Manager Phone: _____ Email Address: _____

Asst. Manager Name: _____ Asst. Manager Phone: _____

Asst. Manager Email: _____

League Type (Choose your preferred night of play under desired league type drop down):

- Perinton Men's:
- Perinton Coed:
- Chili Coed:

Skill Level (Choose ONE under the Drop Down):

****Please indicate level of play so we can do our best to assign well-balanced leagues****

Please Make Checks Payable to:

RocSports, LLC
7 Shenandoah East
Spencerport, NY 14559

Acceptable Methods of Payment:

1. Cash
2. Venmo (@Roc-Sports)
3. Check



Summer League Fee Info:

10 game regular season!
\$650 per team

"First come, first serve"

For more information:

- Email: rocsportsny@yahoo.com
- Phone/Text:
Pat (Coed) (585) 455-7827
Jim (Men's) (585) 203-6298
- Website: www.rocsportsny.com