



League Membership Form

This form must be FULLY COMPLETED and sent to the league office at least 5 weeks before opening day.

Church Name:
Address:

Pastor:
Address:
Home Phone: Work Phone: E-mail:
Manager (Must be older than 21):
Address:
Home Phone: Work Phone: E-mail:

Church Denomination/Affiliation:

Churches Brief Doctrinal Statement: (Use back if necessary)

Do you promise to uphold all SCL standards, including the prohibition of profanity, and the use of alcoholic beverages and tobacco? YES NO

Will you provide a playing site (including bases) for all of your home games? YES NO

Will you comply with the SCL scheduled playing dates of Mondays and/or Tuesdays (with Thursdays as a possible make-up day)? YES NO

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Pastor's Signature

Date

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Manager's Signature

Date