



2019 FALL BASEBALL REGISTRATION FORM TAYLOR LITTLE LEAGUE

PLAYER NAME		SHIRT SIZE (Youth or Adult)	
Address		BIRTHDATE	
City/State/Zip		Gender (circle one)	M F
Home Phone	()	League Age	
Email			
		My child will play:	<input type="checkbox"/> Baseball <input type="checkbox"/> Softball

Coach Request:
Player Request:

PARENT #1 (Phone or email required)		PARENT #2 (Phone or email required)	
Name		Name	
Phone	()	Phone	()
Email		Email	

NOTES:

- 1) We ask that all parents/guardians please help by taking turns in the concession stand during games. We appreciate all the help we get from everyone and couldn't do it without you!
- 2) We also ask that if you see trash in the stands, on the ground, etc, please help keep our fields clean by using the trash cans and/or dumpsters located around all the fields.

Signature: _____ Date: _____

FALL BALL REGISTRATION FEE - ALL DIVISIONS \$50
INCLUDES TSHIRT AND CAP

FOR LEAGUE USE ONLY

PAID: CASH \$ _____ OR CHECK # _____ INITIALS: _____