2019 McHenry Pigtail League Fall Ball Registration Form

Player Name Address								Birth Da Age	te		
City			-		7	Zip		Home P	hone		
Email								Cell Pho	-		
School								Grade			
Health Issues / S	Special r	needs -	nlease expl	ain				Jiuuo			
Dad / Guardian	special i	iccus	picase expi		Mor	m / Guardian					
Cell Phone					_	I Phone					
Email			// i		Em					_	
Name of Sister in	n same	Division	,								
Emergency Contact							Pl	Phone Number			
Player Bats	L or	R	Player Th	nrows L	or R	Years I	Pitching		Years Catcl	hing	
Years in MPTL		Ye	ears Other		Expla	in					
Proof of age wi 6U requests for cutoff will be ba	teams/r	manage age as o	rified for all ers, etc. will b of January 1	players new be noted, <u>bu</u> st 2019, All	to the	guaranteed. 8 ers have the o	ll players BU – 16U ption to p	who fa will not olay up	be considered. one division.	. Divisional	
Division Ages		<u></u>	SU	8U 7-8		9-10	12U 11-12		14U 13-14	16U 15-16	
	All playe		encouraged		te in t				in next spring.	13-10	
						bove and you					
Jersey Size	G	Girls S	Girls	M G	irls L	Ladies S	S La	adies M	Ladies L	Ladies XL	
Registration Fees	1 Player 2 Players 3 Players \$ 35.00 \$ 60.00 \$ 75.00 If interested in managing or coach, please fill out an application and background check for consideration.										
I am interested in: (Select One)			N	Manager			Assistant Coach			Parent Helper	
Name & Phone	Number:						**Appl	ication a	nd background c	heck required**	
As parent or legal of harmless any and a agents and or assign practices or other legal of the second	all claim ve gnees for a	ersus the any and a	McHenry Pigta III damages wh	il League. I un	derstar	nd that this shall a	pply to all o	cooperatir	ng agencies, their re	epresentatives,	
As parent or legal gactivities.	guardian, I	assume	responsibility for	or the applicant	t's actio	ons and conduct a	as well my o	own cond	uct at all such leag	ue-sponsored	
I agree that the Mc	Henry Pigt	tail Leagu	ie may post ph	otos of my child	d on its	website.					
I agree that the Mc understand that any McHenry Pigtail Le	y actions o	of this nat	ure shall be rev								
Date			_ Signature								
	N	/lail red	aistration. a	alona with p	oaymo	ent and copy	of birth	certific	ate, to:		

Mail registration, along with payment and copy of birth certificate, to:

McHenry Pigtail League, PO Box 1091 McHenry, IL. 60051.

For more information about the league please visit www.mchenrypigtail.com

		MPT	L Use Only	1
Payment - Cash / Check/CC	Amount \$		Check #	