Bomb Squad Baseball Registration Form

Player Information: Gender M or F Phone DOB______ Age (Prior to 5/1)_____ Parent/Guardian 1 Information: Relationship Address _____ Email Address_____ Alt Phone_____ Parent/Guardian 2 Information: Relationship_____ Address Email Address_____ Alt Phone **Team Level** 10U 11U 12U 13U 14U 15U 16U Registration Fees for the upcoming Season will be determined by January 1st. Registrations may be paid in 3 installments or in full. I understand all registration fees are due by March 1st. I understand if I, or my child, are removed from the BSB program any registration fees paid will not be reimbursed, they will be considered a donation to the team designated on this registration form.

Date

Parent Signature