

REGISTRATION FORM

Child's Name _____

Age as of April 30, 2009 _____

Guardian Name _____

Address _____

Phone _____

I or my spouse would be willing to help coach a team Y N
(If no one volunteers to coach, we will not have a team and money will be refunded)

Payment

T-Ball (5-6)	\$25	_____
Rookie (7-8)	\$40	_____
Minor (9-10)	\$55	_____
Major (11-12)	\$55	_____
Pony (13-14)	\$75	_____

Total _____
Make checks payable to Wellsville City

Shirt Size:

Youth Small _____
Youth Large _____
Adult Small _____
Adult Medium _____
Adult Large _____
Adult XL _____