

San Bruno Pee Wee Baseball
2009 Dale Wilson Memorial
4th of July Tournament
July 2nd-5th

ENTRY FORM

Team Name: _____
Manager's Name: _____
Age Group (10u or 8u): _____
Email Address: _____
Manager's Address: _____
Daytime Number: _____
Cell phone number: _____

Information require for your team's registration to be complete:

1. Complete the Tournament Entry form and roster
2. Pay the tournament fee of \$500.00 by either mailing a check payable to San Bruno Pee Wee Baseball, 851 Cherry #27/407, San Bruno, Ca 94066 or Pay via PayPal to the following account: ray@sanbrunopeeweebaseball.org
3. Email 4thofjuly@sanbrunopeeweebaseball.org your team's liability insurance
4. Submit your team coaches and player information on the roster form. It is important that you include the preferred T-Shirt size for each player and coach to accommodate an accurate ordering of sizes. Please note that a team total of 15 shorts will be provided. Therefore if you have 15 players, free shirts will not be given to coaches. Coaches will have an option to purchase a shirt.
5. You will receive a confirmation once the Tournament Committee has received ALL of the above required information.

2009 4th of July Team Roster

Team Name: _____

Age Group: _____

Manager Name: _____

Manager Day Phone: _____

Manager Cell Phone: _____

Coach Name: _____ Shirt Size: _____

Coach name: _____ Shirt Size: _____

Coach Name: _____ Shirt Size: _____

Player Name: _____ DOB: _____ Shirt Size: _____

Player Name: _____ DOB: _____ Shirt Size: _____

Player Name: _____ DOB: _____ Shirt Size: _____

Player Name: _____ DOB: _____ Shirt Size: _____

Player Name: _____ DOB: _____ Shirt Size: _____

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