

LEAGUE REGISTRATION FORM
SOUTHERN ILLINOIS SELECT BASEBALL LEAGUE (SISBL)
2018 TEAM REGISTRATION
FREEBURG SPORTS COMPLEX – FREEBURG, ILLINOIS
DEADLINE – FEBRUARY 17, 2018

Team Name _____

| Manager | Coach |
|------------------|------------------|
| Name | Name |
| Address | Address |
| City, State, Zip | City, State, Zip |
| Home Phone | Home Phone |
| Work Phone | Work Phone |
| Cell Phone | Cell Phone |
| E-Mail Address | E-Mail Address |

Please select age group you are registering and whether they are playing up in age:

| Division | Playing Up |
|---|--|
| <input type="checkbox"/> 8u Machine Pitch | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 9U | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 10U | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 11U | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 12U | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 13U | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> 14U | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| | |
|-----------------------------------|---------------------------|
| 8u Machine Pitch Cost/Game | \$60/ 1 hour games |
| 9u-14u Cost/Game | \$120/ 1:50 games |

Number of Games is dependent upon how many teams register in your respective division.

Please return this application to Glen Polacek at 202 North Monroe Street, Freeburg, IL 62243.

A NON-REFUNDABLE DEPOSIT OF \$200 PAYABLE TO SISBL MUST ACCOMPANY THIS APPLICATION. ALL CHECKS WILL BE CASHED AND DEPOSITED UPON RECEIPT. THIS DEPOSIT WILL BE APPLIED TO YOUR LEAGUE FEE.

For SISBL Use Only:

Date Received _____ Amount _____

Check Number _____