

Players Name:	DOB:
	Cell #:
Level trying out for: 10U 12U 14U	16U 18U
High School:	Upcoming grade level:
Please circle if you take lessons in: Hitti	ng Catching Pitching With who:
Prior Travel Teams:	
Positions you play:	
	Zip Code:
Mother's Name:	Cell #:
Mothers Email Address:	
Father's Name:	Cell #:
Father's Email Address:	
EME	RGENCY CONTACT
Name:	Relationship to player:
Cell #:	Home #:
UNIFORM INFORMATION	
Please checkT-shirts ize: YS	YM YL AXS AS AM AL AXL AXXL
Please checkJers ey size: YS	YM YL AXS AS AM AL AXL AXXL
Please checkPant size: YS	YM YL AXS AS AM AL AXL AXXL
Shoe size:	
Jersey #: 1st choice2nd	d choice 3rd choice