

# Iowa City Babe Ruth Baseball

## 2008 Spring 13-15 Registration Form

(Birth dates between May 1, 1992 and April 30, 1995)

Today's Date: \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Player Last Name First Name Sex Birthdate

Player's E-mail address: \_\_\_\_\_

Lives with (circle one) Father Mother Both Team Last Year \_\_\_\_\_

Current School: \_\_\_\_\_ If you were a National League player last year, do you  
Adult Jersey Size: \_\_\_\_\_ want to try out for American League? \_\_\_\_ YES \_\_\_\_ NO

Do you participate in another baseball league? \_\_\_\_ AAU \_\_\_\_ CABA \_\_\_\_ High School \_\_\_\_ Other \_\_\_\_\_

If you have siblings in the League, do you prefer that they be on the same team? \_\_\_\_ YES \_\_\_\_ NO \_\_\_\_ NO PREFERENCE

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### Father:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Father's e-mail address \_\_\_\_\_  
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### Mother:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Day Phone: \_\_\_\_\_

Mother's e-mail address \_\_\_\_\_  
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### Additional Instructions:

\_\_\_\_\_  
Signature of Parent/Guardian

Can you help as a volunteer: \_\_\_\_ Board Member \_\_\_\_ National League Mgr \_\_\_\_ Coach \_\_\_\_ Team Parent \_\_\_\_ Concessions

Return this entire registration form along with a check payable to *Iowa City Babe Ruth* for \$140.00 to: Babe Ruth Registrations, c/o Ann Romanowski, 502 Woodridge Ave., Iowa City, IA 52245

If you are new to Iowa City Babe Ruth and have never provided a copy of your birth certificate to Iowa City Babe Ruth Baseball, we will need a copy of your birth certificate.

***Deadline is 5:00 pm Friday, March 7, 2008***