



Solanco Youth Baseball

2019 REGISTRATION

<http://www.sybaseball.com/>

Player information

Player name: Last _____ First _____

Address: _____

Town: _____ State: _____ Zip: _____

Contact info:

Home phone: (____) _____ Cell (____) _____

Email: _____

Date of Birth: _____ School: _____ Grade: _____

Parent or Guardian Info:

Name (Father) _____ Cell: _____

Name (Mother) _____ Cell: _____

Guardian: _____ Cell: _____

Emergency Contact:

Name: _____ Phone: _____

Circle Shirt Size: YS YM YL YXL S M L XL

Jersey Number preference: 1st _____ 2nd _____ 3rd _____

_____ 10U: \$135

_____ 12U: \$165

_____ 14U: \$185

Check if you're eligible for sibling discount: older player is full price, additional players get \$20 discount per registration.

Make Checks payable to Solanco Youth Baseball

TOTAL: _____

Solanco Youth Baseball has permission to use my child's photograph to promote SYB. I understand that the images may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

Parent/Guardian Signature: _____ Date: _____

Send to: Rich Frampton
620 Scotland Rd
Quarryville, PA 17566

