



HUDSON VALLEY SPORTSDOME INDOOR BASEBALL TOURNAMENT

10U FREEZE OUT

Friday, December 28, 2018

TEAM REGISTRATION FORM

Team Fee
\$800

Club Name _____ League _____

Team Name _____ Under _____

Coach _____

Phone _____ Alternate Phone _____

Address _____ E-Mail _____

City _____ State _____ Zip _____

Team Contact (*other than coach*) _____

Phone _____ E-Mail _____

Emergency Contact – Morning of Tournament – Name/Phone # _____

PLAYER NAME	BIRTHDATE	UNIFORM #
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1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

*** Birth Certificates must be presented upon request for player age verification.**
Waivers (available on our website) must be completed & signed by parent/guardian and presented at registration.

FOR PAYMENT: PLEASE CHARGE MY: VISA MASTERCARD DISCOVER CHECK ENCLOSED**

CREDIT CARD INFORMATION:

Card # _____ Expiration Date _____ V-Code _____
Name on Card _____
Billing Address: Street/PO Box _____ City _____ State _____ Zip _____
Cardholder's Signature _____ Phone # _____

I understand that Hudson Valley Sportsdome, Inc. assumes no responsibility for any injury resulting from participation in the Tournament. Coach's Signature _____

**** Please make check IN THE AMOUNT OF \$800 payable to: Hudson Valley Sportsdome and send to:**
Hudson Valley Sportsdome, 240 Milton Turnpike, Milton, NY 12547 Phone: 845-795-5220 Fax: 845-795-5264
www.hudsonvalleysportsdome.com