Fostoria Junior Baseball Classic Registration
June 15th – 17th 2012

Age Group

____8U Fee $250.00 ___10U $300.00 ___12U $300.00 ___14u $350.00

Team Name:_____

Coach:_____Email_____

Address:_____

Home#:_____Cell#:_____

Roster *(Please Print)* ***Maximum players per team is 15***

Jersey #	Player Name (Last, First)	Age	Birthdate (mm/dd/yyyy)

Having been informed of the age limits for the tournament, I agree that all the above information is accurate and true. I understand that any player may be asked to show documentation of age. If documentation cannot be submitted for record, player may be asked to stop playing at any time until it can be shown. I also understand that any player/team found falsifying birth date information is subject to forfeiture of any game or removal of team from the tournament without return of registration fees.

Check One:

_____I have enclosed a check for $_____I will mail check prior to the drawing

XSignature_____Date_____

All payments must be received prior to tournament draw. Please make all checks payable to:

Fostoria Junior Athletic Association
P.O. Box 532
Fostoria, OH 44830

Questions: contact Doug Reiter 419-934-0076
Brooks lance 419-934-3661