

**East Meadow Baseball Memorial Day Tournament
2018
Registration Form**

Team name: _____

Check box for age group of team entering the tournament:

DIVISION 12UA 12UB 11UA 11U 10U 9U

DIVISION 13U 14UA 14UB

Is your team available to play on Friday Night 5/25/18? Yes No

Manager Name: _____

Manager Cell phone number: _____

Manager Email address: _____

Coach Name: _____

Coach Cell phone number: _____

Coach Email address: _____

Please make check payable to: East Meadow Baseball

Mail to: East Meadow Baseball, P.O. Box 185, East Meadow, New York 11554