



7th Annual San Diego Memorial Day Weekend Fun Baseball Tournament

TEAM REGISTRATION FORM (MANAGER ONLY)

Please Complete and Return to Tournament Staff by March 15, 2017.

Payment Info: Final Team Roster and payment due May 1, 2017.

Make Checks for \$155 per Player Payable to "North County Men's Baseball League"
(estimated \$130 tax deductible). Discounted team payments due March 1, 2017.

Mail to: Jim Teeter, 2523 El Gavilan Ct, Carlsbad CA 92009.

Desired Division? **(circle: American / National / 65+)**

Divisions will be in effect only if 4 or more teams opt in to the division. No age waivers)

Team Name _____

Mgr. First Name _____ **Last Name** _____

Mgr. Address _____

City _____ **State** _____ **Zip Code** _____

Home Phone _____ - _____ - _____ **Cell Phone** _____ - _____ - _____

Mgr. e-Mail _____