

REGISTRATION FORM

ANTIGO STALLIONS YOUTH BASEBALL TOURNAMENT

JULY 24-26, 2009 KRETZ/LAKE PARK, ANTIGO

Team Name & City _____

Circle 9U, 10u, 11u, 12u, 13u, 14u, 15u

Coach _____, email _____

Cell phone _____, Home Phone _____, Work phone _____

Address _____

Fees: 9u, 10u, 11u, 12u, 13u=\$250, 14u, 15u=\$300

Amount enclosed: _____

TOURNAMENT DIRECTOR: RANDY KREBS HOME PHONE; 275-4590

Email: randykrebs@verizon.net CELL PHONE; 216-0661

WORK PHONE; 627-1000

Make checks payable to: Stallions Baseball

Mail to: 2317 Neva Rd.

Antigo, Wisconsin 54409

For more information look for our tournament on Eteamz.com

Antigo Stallions Youth Baseball Tournament, 2009

Team Roster

	Player Name	Number	Birth Date
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			

Coach's Signature _____