



NJYB MEMORIAL DAY TOURNAMENT IN HACKENSACK

2015 REGISTRATION TOURNAMENT REGISTRATION FORM

Town & Team Name _____

Manager's Name _____

Manager's Address _____

City _____ State _____ Zip Code _____

Manager's Home Phone _____ Cell Phone _____

Email _____

ASST: Coach Contact: Name _____ Cell Phone _____

PLEASE CIRCLE THE CORRECT AGE BRACKET THAT YOUR TEAM IS ENTERING THE TOURNAMENT

OPEN TO ALL TEAMS (CLUB -ALL- STAR- TOWN TRAVEL) from 8u-16u These Division are now Called our

TRIPLE A Division



MANTLE 16U/15U



KOUFAX 14U



GRIFFEY 13U



REESE 12U



HODGES 11U



MAYS 10U



ROBINSON 9U



CLEMENTE 8U

Returning for the 2015 10U-12U & 14U TOWN TEAM'S ONLY Now called the Single A Division



Willie Mays 10u Town ONLY



Pee Wee Reese 12u Town ONLY



Sandy Koufax 14u Town Only

COST PER TEAM ;

11U THRU 16U = \$650.00

8U -THRU -10U = \$550

WE WILL ONLY TAKE THE FIRST PAID 8 TEAMS IN EACH DIVISION.

AFTER THAT TEAMS WILL BE PLACED ON A WAITING LIST.

****TEAMS MUST PROVIDE INSURANCE NAMING NJYB AND THE CITY OF HACKENSACK ****

****AS ADDITIONAL INSURED ****

Return this form with your check or money order to cover your registration to.

N. J. Y. B. PO Box 5044, South Hackensack, NJ 07606