



Mt. Lebanon Baseball Association  
**Minors** - July Ball Registration Form

Player Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

ZIP: \_\_\_\_\_

Phones: \_\_\_\_\_

E-mail: \_\_\_\_\_

Age of Player: \_\_\_\_\_

Birthdate: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_ Grade you have completed this year

Parent Name: \_\_\_\_\_

I would like to Manage or Help Coach, Check One:

Manage: \_\_\_\_ Coach: \_\_\_\_

Name of Volunteer: \_\_\_\_\_

**Make Check Payable to: MLBA**

**Mailing Address is on the website page for Minor July Ball**

**NOTE: This Form is Editable using Adobe Reader**