

**Personal Information & Registration Form:**

Name: \_\_\_\_\_  
Position: \_\_\_\_\_ / \_\_\_\_\_ (primary & secondary)      Bats/Throws: \_\_\_\_\_

Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

**Are you interested in a campus tour and/or information session?** \_\_\_\_ Yes \_\_\_\_ No

High School (If Applicable): \_\_\_\_\_ Coaches Name \_\_\_\_\_ Cell \_\_\_\_\_

Graduation Year: \_\_\_\_\_ G.P.A. \_\_\_\_\_ SAT \_\_\_\_\_ ACT \_\_\_\_\_

T-shirt Size: \_\_\_\_\_ (SM-XXL)

**Travel Ball Information:**

Team: \_\_\_\_\_ Jersey # \_\_\_\_\_ Coach: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Emergency Information:**

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Number: \_\_\_\_\_

Allergies: \_\_\_\_\_ Medical Conditions: \_\_\_\_\_