

# **REGISTRATION FORM**

**MEMORIAL CLASSIC May 26-27th, 2018**



## **REGISTRATION FORM**

Team Name \_\_\_\_\_ Age Group \_\_\_\_\_

Head Coach: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail (PRINT CLEARLY): \_\_\_\_\_

2<sup>nd</sup> Contact: \_\_\_\_\_ Cell: \_\_\_\_\_

E-Mail (PRINT CLEARLY): \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_ ZIP: \_\_\_\_\_

Checks should PAYABLE To: Ohio FP Umpires.

**Cost: \$350 per team, \$325 for multiple teams from same organization.**

Questions contact Bob Himmelein 440-773-9973 or e-mail at  
[bobh1951@gmail.com](mailto:bobh1951@gmail.com)

•

Mail to:

Bob Himmelein

15705 Tavern Rd, Burton, OH 44021-9638

Burton, OH 44021