

Falmouth Youth Baseball  
PO Box 418  
Falmouth, MA 02541

**Tournament Registration Form**  
**Falmouth 11 U Summer Slam Tournament**  
**June 27 - 30th 2019**

Required information that must be presented prior to your first game:

- 1.) Proof of Insurance                      2.) Team roster with copies of birth certificates

**Entry Form**

League Name: \_\_\_\_\_

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

League Official: \_\_\_\_\_ Phone: \_\_\_\_\_

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

**Cost: \$475.00 per team**

**Waiver**

As a representative for the above mentioned league, I do hereby waive any claim against Falmouth Youth Baseball, Falmouth Tournament League or its representatives for any injuries that may result to player or players or team officials during the course of the Tournament. I understand that each team will be responsible for providing their own accident and liability insurance.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Please clearly provide **Manager's name, phone number & email address**

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Please make check payable to Falmouth Youth Baseball in the amount of \$475.00 per team with this registration and mail to the above address. Once all registrations have been received, additional Tournament information and game schedule will be sent. No refunds for any cancellations.