

Last Name

**2023 EYL Registration Form**

Family ID

**Family Information - please complete this form as neatly as possible.**Address:  Apt:  City:  Zip: Father Name:  Phone: Mother Name:  Phone: Email: Check box if information is the same as Last Year **Player Information**

Player (Please write Player First and Last Name below)	Shirt Size	Fee	Age	M/F	Birthdate
1. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Registration Fee:**  
 \$70 for each player age 4&5 (Tee Ball)  
 \$100 for each player aged 6.  
 (7yo playing Pioneer or Teeners)  
 \$150 for each player aged 7 to 12.  
 \$160 for High School Girls Softball  
 \$200 for Junior Baseball 13 to 16

**Multi-Player Same Family Discount**  
 Two players deduct \$20,  
 Three players deduct \$40,  
 4 or more deduct another  
 \$20 for each player over 3 total.

<b>Bond:</b>	<b>\$100</b>
<b>Discount:</b>	<input type="text"/>
<b>Total:</b>	<input type="text"/>

**2023 Participation Bond** (Refundable at end of season)

Please make check payable to **Elmora Youth League**

**Parent Participation (All Parents are required to assist in running EYL)**
 Team Manager  Asst. Coach  Scorekeeper  Team Mom  Sponsor
Requests: 

Initial above to agree

I certify that I am the parent/guardian of the child being registered and I consent to the video collection described on our web site.

Would you or your business like to Sponsor A Team? The cost is \$400 per team.

All Families are required to perform Kitchen Duty for 1 game.

**Signature (Parents please read the following statement and sign this document)**

I, the parent/guardian of the above candidate applying for a position on the Elmora Youth League baseball/softball team, hereby give my approval for his/her participation in any and all League activities (including fundraisers) during the 2023 season. I understand that the accident insurance plan of the Elmora Youth League will be in excess over any primary collectible insurance from any private family medical plan in force. All parents are required to support EYL by working in the concession stand. By your signature, you are agreeing to work the concession stand during the 2023 Spring Season. I understand that Major League eligible players must try out for entry to this level of baseball.

(EYL Use Only):

Check# Cash: Amount Paid: Birth Certificate: Medical Form: Parent Signature:  Date: EYL Board:  Date: 

EYL c/o M. Medina  
 1084 Dewey Place  
 Elizabeth, NJ 07202

Bring form to one of our scheduled registrations or you may also mail the forms to:

[www.ElmoraYouth.com](http://www.ElmoraYouth.com)
[info@ElmoraYouth.com](mailto:info@ElmoraYouth.com)