

**2005 Fall League Registration Form
Iowa City Babe Ruth Baseball**

Application for 12-15 Year Old (Birth dates between Aug 1, 1989 and July 31, 1993)

Babe Ruth Use Only
Verified by _____

_____ / ____ / ____
Player Last Name First Name Sex Birthdate

Player's E-mail address: _____ Today's Date: ____ / ____ / ____

Lives with (circle one) Father Mother Both

Current School: _____

Adult Jersey Size: _____

If you have siblings in the League, do you prefer they be on the same team? Yes No No Preference

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Father:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (319) _____ Day Phone: (319) _____

e-mail address _____

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Mother:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (319) _____ Day Phone: (319) _____

e-mail address _____

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Instructions:

Signature of Parent/Guardian

NOTE: League play begins August 28 and ends October 23. No games on September 4.

We are in need of managers and coaches for the fall league. If you can help check here. _____

Return this entire registration form along with a check payable to *Iowa City Babe Ruth* for \$40.00 to: **Babe Ruth Registrations, c/o Ann Romanowski, 502 Woodridge Avenue, Iowa City, IA 52245**

If you are new to Iowa City Babe Ruth and did not provide a copy of your birth certificate to Iowa City Boys Baseball, we will need a copy of your birth certificate. If you provided a copy of your birth certificate to Iowa City Boys Baseball, it has been forwarded to Babe Ruth.

Deadline is 5:00 pm Friday, July 29, 2005.