

**2006 Fall League Registration Form  
Iowa City Babe Ruth Baseball**

**Application for 12-15 Year Old Program (Birth dates between May 1, 1990 and April 30, 1994)**

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                      Preferred Positions \_\_\_\_\_

**School in Fall 2006:** \_\_\_\_\_ Other Leagues: Boys Baseball    CABA    HS    Other  
Adult Jersey Size: \_\_\_\_\_ (Please circle)

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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**Any Instructions:**

\_\_\_\_\_  
Signature of Parent/Guardian

NOTE: League play begins August 27 and ends October 22. No games on September 3.

**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 \$45.00 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 28, 2005.*