



REGISTRATION 2019 SMYBL LEAGUE

TEAM NAME / ORGANIZATION: _____

Select Tournament:

2019 SMYBL League:

Jan-May, 2019 (Balls & Umpires Fee Included)

Awards for 1st and 2nd Place Only!

Select Division(s Circle):

3/5 Tball, 5/6U Coach Pitch/Tball, 7U or 8U Coach Pitch, 8/9AA, 9U, 10U, 11, 11/12AAA and 12U Under
(Fees: \$1100 per team includes games only)

(\$1600 includes games and 1 hour per week practice out of Palmer Park)

CONTACT PERSON: _____

HOME PHONE: _____ CELL PHONE: _____

E-MAIL: _____ FAX: _____

MAILING ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

If Paying by check: _

Return with payment to: SMYBL
P.O. BOX 558633
Miami Fl, 33255

If paying by Credit Card: <https://www.smybaseball.com>