

Dutzow Little League Sign-Ups

SIGN UP DATES

Saturday, January 12, 2019 – 10 am – 1 pm @ Dutzow Ball Park

Tuesday, January 15, 2019 – 6 pm – 8 pm @ Dutzow Ball Park

Sunday, Feb 3, 2019 – 9 am – 11 pm @ St. Vincent's First Sunday Breakfast

or print and mail form at www.dutzowballpark.com

BASEBALL DIVISIONS

Atom: Born 5-01-12 to 4-30-14 _____
Bantam 1: Born 5-01-10 to 4-30-12 _____
Bantam 2: Born 5-01-08 to 4-30-10 _____
Midgets: Born 5-01-06 to 4-30-08 _____
Juvenile: Born 5-01-04 to 4-30-06 _____
Junior: Born 5-01-00 to 4-30-04 _____

SOFTBALL DIVISIONS

Pixie: Born 1-01-12 to 04-30-14 _____
Petite 1: Born 1-01-10 to 12-31-11 _____
Petite 2: Born 1-01-08 to 12-31-09 _____
Chic: Born 1-01-06 to 12-31-07 _____
Sophomore: Born 1-01-04 to 12-31-05 _____
Debutante: Born 1-01-00 to 12-31-03 _____

For more information contact:

Tim Maune: 636-390-3739
Chris Molitor: 636-828-5921
Steve Hanneken: 314-691-3560

Sign-Up Fees:

1 Player = \$ 70
2 Players = \$100
3+ Players = \$130

Late Fees (after 2/15/19)

\$80
\$110
\$140

PLEASE NOTE:

- THERE WILL BE A 13 PLAYER LIMIT FOR EACH TEAM AND PRIORITY PLACEMENT WILL BE GIVEN BASED UPON SIGNUP (POST-MARK) DATE.
- A COPY OF THE CHILD'S BIRTH CERTIFICATE IS REQUIRED FOR ALL NEW PLAYERS.
- CONCESSION STAND DUTY WILL BE REQUIRED & TRACKED FOR ALL REGISTERED FAMILIES

PLAYER/PARENT INFORMATION

PLAYER'S NAME: _____ Shirt Size Youth: S M L
Adult: S M L XL XXL

PLAYER'S ADDRESS _____ CITY _____ ZIP _____

PLAYER'S HOME PHONE _____ BIRTHDATE _____ SEX (M / F)

PARENT 1 NAME: _____ CELL# _____

EMAIL ADDRESS: _____ Do you receive Texts: Y or N

PARENT 2 NAME: _____ CELL# _____

EMAIL ADDRESS: _____ Do you receive Texts: Y or N

I WOULD LIKE TO: MANAGE _____ COACH _____ UMPIRE: MYSELF | MY CHILD(13&UP)

COMMENTS: _____

DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS? _____

SIGNATURE OF PARENT/GUARDIAN* _____ DATE _____

*I agree to complete required concession stand obligations and understand that financial penalties will be imposed in the subsequent year if the obligations are not fulfilled as required.

Please make checks payable to:

DUTZOW COMMUNITY CLUB

DIVISION _____

Mail to: Dutzow Community Club - Registration
14955 State Highway TT
Marthasville, Mo 63357

FEE _____