Katy American Little League Registration

FALL 2019

Date:						
Player Information		95		→): - ::	KALL Staff Only	
Returning Player:	Yes	No			League Age:	
Name:					Division:	
D.O.B.					Amount Paid:	
Address:				_		
				_		
City:	State:	Zip		-		
Phone:				_		
Neighborhood:				-		
School:				.		
Grade:				_		
Jersey Size: XS YS YM YL YXL Parent Information	AS AM ALAXL	AXXL		Hat Size: Youth	Adult	
Name:				-		
Phone:						
Email						
Name:						
Phone:						
Email:						
Please circle any t	hat apply					
Do you want to Head Coach? Yes / No (MUST FILL				L OUT SEPA	ARATE VOLUNTEER APPLICATION)	
Do you want to be a	Team Rep(Team IV	lom)? Yes /	No			
Do you want to be o	n Pool Player list?	Yes / No				
KALL T-shirt \$15.0	00 Yes / No	Qty:	(KALL fund	raiser T-sh	irt)	
SnoCone Cup \$18.0		Qty:	-	ee SnoCones entire year @ concession stand)		
			(can be pu	rchased for	r \$25 when registration ends)	
*Special Requests:						

Note: Refunds are not guaranteed. They will be reviewed on case by case scenario.