

The Donegal Baseball Booster Club is proud to present

THE 2019 DONEGAL INVITATIONAL WIFFLE BALL TOURNAMENT

Open to students in the Donegal School District



Sunday, January 27, 2019 at 1pm (doors will open at 12:30pm)

Boys and Girls Brackets for Grades K-2, 3-4, 5-6 and 7-8 in the DHS Gymnasium
DOUBLE ELIMINATION TOURNAMENTS (ONE GAME CHAMPIONSHIP)
\$50 per team, minimum 5/maximum 7 players per team

This event is not sponsored or endorsed by the Donegal School District

Registration forms and payment can be mailed or presented at the registration table the day of the event. Please have ALL forms and payment together. The team parent/coordinator is responsible for handing in everything for the team. Please make checks out to Donegal Baseball Booster Club.

Early registration forms can be emailed to: donegalindiansbaseball@gmail.com

Registration forms with payment can be mailed to:

Donegal Baseball Booster Club

c/o Greg Bechtold

106 Hillcrest Rd

Marietta, PA 17547

\$50 per team, minimum 5/maximum 7 players per team

Registration at the door will be on a first come, first serve basis, at an

increased cost of \$60.00 per team.

ANY QUESTIONS, PLEASE EMAIL US AT: donegalindiansbaseball@gmail.com

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PLAYER REGISTRATION FORM - Each player must complete his/her own registration form. Please have a team parent/coordinator send the entire set of player registration forms & payment in the same envelope. Please provide one parent contact with each team. Confirmation will be sent to the parent contact listed. Please send correct payment.

PLAYER'S NAME

GRADE PHONE#

*Parent/guardian signature

***Waiver of liability:** I, the above named for the participation in the above named activity, hereby waive any claim for bodily injury or property damage against the Donegal School District, its agents, servants, and/or employees, while a participant in the above named activity. I also give permission for a doctor and/or medical personnel to expedite emergency medical treatment in case of injury. Each parent must sign the original registration form the day of the event or prior to mailing the form.

Team Name:

Age Bracket: _____

Players:

1. 2.

3. 4.

5. 6.

7. _____

Team parent/coordinator email & phone number: _____