

2011 Client Information Form

OPlease complete this form and submit it with your Facility Request.

League Name: _____

Minor - Male " Minor - Female " Adult - Male " Adult - Female "

of Teams: _____

#of Players per Team: _____

of League Members: _____ Average Length of a Game: _____

Minor Leagues - Please provide age groups and number of players per age group (attach list if necessary).

League Executive and/or Alternate Contacts:

<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (W) _____ (H) _____</p>	<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>Postal Code: _____</p> <p>E-mail: _____</p> <p>Phone #: (W) _____ (H) _____</p>
<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>E-mail: _____</p> <p>Phone #: (W) _____ (H) _____</p>	<p>Title/Role: _____</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____</p> <p>E-mail: _____</p> <p>Phone #: (W) _____ (H) _____</p>