Challenger Registration

Trumbull Little League

Application to play Challenger Little League – Spring 2011

PLAYER INFORMATION

First_____ Last_____

School_____ Grade_____

Sex (M/F)_____ DOB_____

PARENT INFORMATION

Father

First_____ Last_____

Address_____

City/State/Zip_____

Phone (H)_____

Phone (W)_____

Phone (C)_____

Mother

First_____ Last_____

Address_____

City/State/Zip_____

Phone (H)_____

Phone (W)_____

Phone (C)_____

**Registration deadline – April 22, 2011

Please mail registration to: Trumbull Little League-Challenger Division

P.O. Box 241

Trumbull, CT 06611

Or email it to trumbulllittleleague@gmail.com