



REGISTRATION

Northeast Xtreme

Tryout Number: <i>Xtreme Use Only</i>

Player Information

Name:			
Date of Birth:		Age:	
Address:			
City:			
State:		Zip Code:	

Age Group	Anticipated H.S. Graduation
10U	2018
12U	2019
14U	2020
16U	2021
18U	beyond 2021
Check One	Check One

Contact Information

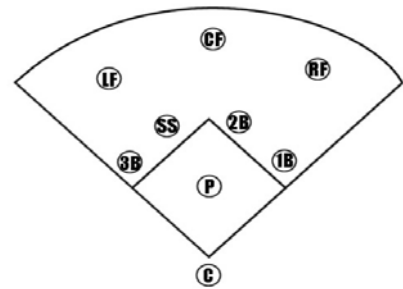
Mother's Name:	Cell Phone:
	E-Mail:
Father's Name:	Cell Phone:
	E-Mail:
Home Phone:	

The phone number(s) listed above are the best suited for contacting the player/parent after the tryouts.

Player Experience / Information

Tournament Ball Experience		
Yes	No	Years: <input style="width: 80%;" type="text"/>
Check One		

Indicate Top "2" Positions



Travel Team (s):	
Summer Team (s): <i>MiddleEssex League</i> <i>Town or Team</i>	
Rec Team (s): <i>Town</i>	

Formal Training			
Pitching	Catching	Hitting	Coach/Source
Check all that Apply			

Player Profile		
Check all that apply		
Throw	Left	Right
Bat	Left	Right
Slap	Yes	No

Personal Goals:	
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