



Diamond Devils

**EDINBURGH DIAMOND DEVILS
PLAYER REGISTRATION FORM**

FULL NAME - _____

ADDRSS - _____

POST CODE - _____

BIRTH DATE - _____ BIRTH PLACE - _____

NATIONALITY (AS PER PASSPORT) - _____

TELEPHONE - _____ MOBILE - _____

HEIGHT - _____ WEIGHT - _____

ANY MEDICAL CONSIDERATIONS? - _____

BASEBALL -

UNIFORM NUMBER - 1) _____ 2) _____ 3) _____

BAT - _____ L / R _____ THROW - _____ L / R _____

ANY PREVIOUS EXPERIENCE? - _____
