

WEST POINT LITTLE LEAGUE

2009 Challenger Form

www.wpll.org

724-989-2152



PLAYER'S NAME: _____

DATE OF BIRTH: _____

AGE: _____

SHIRT SIZE:

___ym ___as ___yl ___am ___other



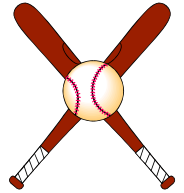
PARENTS NAME: _____

ADDRESS: _____

HOME PHONE: _____

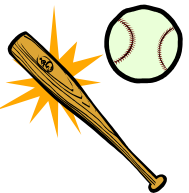
CELL: _____

EMAIL: _____



EMERGENCY CONTACT: _____

Phone: _____



DATES AND TIMES OF GAMES: May 17, 31, June 7, 14
All Games Start at 1pm at the West Point Little League Complex *

The Registration Fee is \$18 per player **

Please mail completed registration form and fee to:
Larry Jesky, WPLL Treasurer
116 Skyview Drive
Greensburg, PA 15601

If you do not have equipment, WPLL will provide at no cost to the player's family.

*** Directions to the complex can be found at: www.wpll.org**

**** If a grant is approved by Little League, then the registration fee will be waived and all paid fees will be refunded.**

***** No one is turned away; If you cannot afford the registration fee, please call the number listed on the form.**