



28th ANNUAL MID ISLAND TOURNAMENT

2011 APPLICATION FORM

League Name _____ LL Charter # _____

Manager _____ Home Phone _____

Work Phone _____ Cell Phone _____

E-Mail Address _____

Coach _____ Home Phone _____

E-Mail Address _____ Cell Phone _____

League Rep _____ Home Phone _____

Address _____ Zip _____

E – Mail Address _____ Cell Phone _____

Boys: Age of Team: Under 8 ___ 8 ___ 9 ___ 10 ___ W10 ___ 11 ___ W11 ___ 12 ___

W12 ___ 13-14 ___ Girls: Age of Team: 8/9/10 ___ 11/12 ___ 13/14/15 ___

Age will be the official age cut-off for the 2011 season. No grandfather clause. We need 8 or more teams to create a division. If less than 8 teams, divisions will be merged. i.e.: 11 and W11play.

My team would like to play a total of ___ games or ___ games per week. We can play on:

Mon. ____, Tues. ____, Wed. ____, Thurs, ____, Friday, ____, Sat. ____, Sun. ____

The team cannot play on the following days because of a conflict: _____

_____ I would like to end my season on: _____

Your Little League insurance covers your team through summer play at no additional costs. A copy of your league's insurance policy with coverage through 8/31/2011 must be submitted. The Hicksville Baseball Association, Town of Oyster Bay, Town of Hempstead and Town of North Hempstead must be named as co-insured. Cost is \$350 per team with a maximum of 15 players. Each player will receive a commemorative pin. Trophies can be ordered at a cost of \$7.50 per player. Umpire costs are the home team's responsibility. If you do not have home fields, you will share the cost of umpires for each game. Do you have fields? ___ Y, ___ N. How many ___

Field Availability: Mon ___ Tues ___ Wed ____, Thurs ____, Fri ____, Sat ____, Sun ____