

Murrayville Youth League

Child's Name: _____
(If you have multiple children, please fill out separate forms)

Age: _____ Current Grade: _____ Date of Birth: _____

Shirt Size: _____ Circle One: T-ball Softball Baseball

Child Allergies: _____

Parent Name: _____

Phone # _____

Parent Name: _____

Phone # _____

Would You Be Interested In Coaching?

YES NO

Circle if you would like to help with any of the following:

Head Coach Assistant Coach Sponsor(\$100)

Parent Signature: _____

Questions? Call or Text

Trudie Jackson (217) 248-5916

**We will play primarily in June with a tournament
the 1st or 2nd week of July.**

Please have forms turned in by April 15th. You can return signed forms to the school. Additional forms are available at Heavenly Delight or you can contact Trudie Jackson.