

CABIN FEVER BASEBALL REGISTRATION FORM

1. Player Name (please print) \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_\_  
Parent or Guardian address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
Phone number \_\_\_\_\_ e-mail \_\_\_\_\_  
Interested in being a parent coach? yes\_\_\_\_\_ no\_\_\_\_\_

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2. Please circle the T-shirt size you would like to order:

YS – (youth small)      YM – (youth medium)      YL – (youth large)

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3. Your registration fee of \$99 can be paid by check or money order only please to Mark Mazzone.

4. Please mail this registration form and your payment to:

Mark Mazzone  
Cabin Fever Baseball  
11479 Renee Court  
Marilla, NY 14102

Thank you!



Questions? Email: [cabinfeverbaseball@rochester.rr.com](mailto:cabinfeverbaseball@rochester.rr.com)