

LAKE VIEW Father's Day CLASSIC

10U

- JUNE 14 - JUNE 16, 2019 -

"Hey Dad?... You wanna have a catch?" - Kevin Costner in Field of Dreams

- **8-Team Maximum**
- **4-game guarantee for each team (weather permitting)**
 - **All teams play on Championship Sunday**
 - **All birthdates after 4/30/2008 eligible**

10U:\$450 (\$425 paid by 4/1)



Contact Bill Brodie

williambrodie@verizon.net



Lake View Father's Day Classic 2019 Tournament Registration

Team Name: _____

Self-rating of team:
A B

Organization: _____

Coach's Name: _____

Cell Phone #: _____

Address: _____

E-Mail Address: _____

Email a completed registration form to the email addresses listed, or mail completed registration to:

Bill Brodie
3466 Heatherwood Dr
Hamburg, NY 14075

✓ Checks should be mailed to above address and made payable to: *Lake View Athletics 10U Travel*

Proof of insurance is required to participate in the all tournaments. Mail a copy of your Certificate of Insurance to the above address. A copy must be on file prior to your first game.

Any questions regarding registration can be directed to:

- 10U Bill Brodie williambrodie@verizon.net

Office use only:

Check # _____ Amount received: \$ _____ Date: _____

Check received from: _____