

ACME BASEBALL CONGRESS

2011 OFFICIAL APPLICATION/ELIGIBILITY CERTIFICATE FOR Junior and Senior ACME TEAMS

DUE DATE: MAY 31, 2011---All certificates must be accompanied with payment

ENTRY FEES: \$50.00 *per* Jr. Acme Team

LATE FEES (Received on or after June 6th) ---\$100.00 per Jr. Acme Team

\$50.00 *per* Sr. Acme Team

\$100.00 per Jr. Acme Team

Send certificates/payments to: Kristi Spencer; 13432 Waynesfield Road; Wapakoneta, Ohio; 45895

Team Name: _____ School District: _____

City: _____ County: _____ Acme District: _____

Manager's Name: _____

Home Phone: _____ Cell Phone: _____ email address: _____

Team Coaches

Please print legibly

| Head Coach's Name | Team (Circle One) | Cell Phone | Home Phone | Email Address |
|-------------------|-------------------|------------|------------|---------------|
| | Junior Senior | | | |
| | Junior Senior | | | |
| | Junior Senior | | | |

⇨The undersigned desires to apply for membership in the ACME Baseball Congress, Inc. Therefore, enclosed find remittance in the amount of \$50.00, which includes complete cost for regular season and tournament fees for the entire season. It is understood that we are hereby entitled to all privileges and rights with are now and may be established to members of the ACME Baseball Congress, Inc.

⇨The undersigned manager agrees not to hold the ACME Baseball Congress, Inc., Board of Trustees, Officers, Commissioner, Assistant Commissioner, and any other persons affiliated with ACME BASEBALL Congress, liable for any accidents or injuries to my youth that may occur during practice, league or tournament play. The manager agrees that all players and parents/guardians each agree to adhere to all rules and regulations set forth by ACME Baseball Congress, Inc., Ohio High School Athletic Association. By signing this form you understand by your signature that each team member will carry our own Health, Vehicle or any other insurance that is deemed necessary for your youth to participate and that we do not hold ACME Baseball Congress, Inc., its Board Of Directors, Officer, Commissioner, Assistant Commissioners or any other persons affiliated with ACME Baseball Congress, Inc. responsible.

PLAYER ROSTER---Regular Season Play

Please print legibly

| Player's Name (Alphabetically--Last name first) | Incoming Grade | Player's Name (Alphabetically--Last name first) | Incoming Grade |
|---|----------------|---|----------------|
| 1 | | 21 | |
| 2 | | 22 | |
| 3 | | 23 | |
| 4 | | 24 | |
| 5 | | 25 | |
| 6 | | 26 | |
| 7 | | 27 | |
| 8 | | 28 | |
| 9 | | 29 | |
| 10 | | 30 | |
| 11 | | 31 | |
| 12 | | 32 | |
| 13 | | 33 | |
| 14 | | 34 | |
| 15 | | 35 | |
| 16 | | 36 | |
| 17 | | 37 | |
| 18 | | 38 | |
| 19 | | 39 | |
| 20 | | 40 | |

Above roster represents _____ teams.

How many teams?

Authorized Signature: _____

High School Principal or Athletic Director

FOR OFFICE USE ONLY

| Date Posted | | Comments |
|----------------------|-----------|----------|
| Date Received | | |
| Check Number | | |
| Entry(s) Received | Yes No | |
| Authorized Signature | Yes No | |
| Date Amendment Rec'd | | |

Title: _____ School: _____ Date: _____

Please Complete by Sender

| | Level of Team | Entry Fee | Sent |
|---|------------------|-----------|------|
| Team 1 | Junior Senior | \$50.00 | |
| Team 2 | Junior Senior | \$50.00 | |
| Team 3 | Junior Senior | \$50.00 | |
| (\$50.00 per each team) TOTAL AMOUNT ENCLOSED | | | |