



Player Information Form

First Name:

Last Name:

Address:

City:

State:

Zip:

Home Phone:

Alt. Phone:

E-Mail Address:

Date of Birth:

Primary Position:

Other Positions:

Last Year Playing Hardball:

Highest Level of Organized Baseball Played:

I am interested in the following division(s):

18+

28+

38+

If you have played adult baseball before, where and when?

Questions/Comments?

Complete Form and Print

Mail printed form to:

WVMBL

c/o Jeremy Fortune

2225 15th Ave NW

Salem, OR 97304