



**Registration Form**  
 P. O. Box 772 Chatham, VA 24531  
[www.chathamyouthleague.com](http://www.chathamyouthleague.com)  
 434-548-TEAM



**Player Name**   
 (Last, First MI)  
**Primary Address**   
**City/State /Zip**     
**Contact 1**  /   
 Name /Phone #  
**Contact 2**  /   
 Name/Phone #  
**Email**   
**School Attending/**  /   
**High School District**  **New Player**

**Birthday**   
**Gender**   
**Date Paid**

***COST ---- \$60.00***  
 Cash  Check   
 Copy of Birth Certificate  Yes  No  
 My child will  Baseball  
 signup for:  Softball

**Volunteer:**  Coach  Assistant Coach  Board Member  Sponsor

**BASEBALL DIVISIONS (LEAGUE AGE DETERMINED BY AGE AS OF MAY 30, 2026)**

TEE BALL  INSTRUCTIONAL  
 MINOR

**GIRLS SOFTBALL DIVISIONS (LEAGUE AGE DETERMINED BY AGE AS OF MAY 30, 2026)**

U-8

**Shirt Size (Please Check One)**

Youth -  Small  Medium  Large  
 Adult -  Small  Medium  Large  X Large  XX Large  XXX Large

Parent Guardian (Signature) \_\_\_\_\_

Date \_\_\_\_\_

\*\*\* Please make all checks payable to **Chatham Youth League**\*\*\*  
 THERE WILL BE **NO** REFUNDS!