

# GNBA Tournament Registration Form

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1. Fill in the form and send it along with a cheque payable to the GNBA.

2. **Mailing Address** GNBA @ Neil Alderton  
7818 Salisbury Pl.  
Niagara Falls, Ont.  
L2H 2N1

3. PLEASE PRINT

Tournament \_\_\_\_\_ Date \_\_\_\_\_

Team Name \_\_\_\_\_ Division \_\_\_\_\_

Baseball Association \_\_\_\_\_ District (ICBA, YSBA etc) \_\_\_\_\_

Coach's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

Contact Number on Tournament Weekend \_\_\_\_\_

E-mail Address \_\_\_\_\_

Team Manager \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

4 Digit OBA Team Number \_\_\_\_\_ If Select Please indicate \_\_\_\_\_

**Payment of Entry Fee will apply as an appearance fee and will not be refunded**

Additional Information \_\_\_\_\_

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**GNBA**

**EST. 1931**