



Post Office Box 14252 ☎ Poland, Ohio 44514 ☎ [www.tritbaseball.net](http://www.tritbaseball.net)

## DECLARATION OF STATUS – Combined Colt-Palomino Baseball

League Name \_\_\_\_\_

Local Division Director \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Number of Combined Colt-Palomino Baseball \_\_\_\_\_

*Please list in order from strongest to weakest. . Classis Division (C) is higher division. Players Division (P) is lower division.*

**WEAKEST TO STRONGEST**

Division – C or P	Team Name	Manager Name	Home Phone	Cell Phone

\_\_\_\_\_ Number Combined Colt-Palomino Teams  
 X \$175.00 Entry Fee per team

\$\_\_\_\_\_ TOTAL AMOUNT DUE TO TRI-T



Approved by Local Community League President *(and League Director if applicable)*

\_\_\_\_\_  
 Local Community League President Signature

\_\_\_\_\_  
 Local Community League Director Signature

**THIS SECTION TRI-T USE ONLY**

Payment Received by	Check #	Date Received
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