Riverton Raiders

2023 Season
Post 19 Riverton Raiders Legion Baseball
REGISTRATION FORM

Player & Parent Information

Name: _____

Address: _____

Player Birthdate: _____ Player Cell #: _____

Father's Name: _____ Cell #: _____

Father's Address: _____

Mother's Name: _____ Cell #: _____

Mother's Address: _____

Family Email Address: _____

Emergency Contact: _____ Phone #: _____

School: _____ Graduation Year: _____

Uniform Information

Number Preference: _____
(Preference to Returning Players; Provide 4 Numbers in Order of Preference)

Size: _____ (Top) Size: _____ (Bottom) Flexfit Hat Size: _____
(Youth, S/M, L/XL)

Height: _____ Weight: _____