



# American Legion Baseball New Team Registration Form



Team Name: \_\_\_\_\_

Date: \_\_\_\_\_

Will this team be sponsored by an American Legion Post?      Circle:      Yes      No  
 If no, complete Outside Sponsor Registration Form.  
 If Yes, complete this page only.

American Legion Post: \_\_\_\_\_  
 (Full name and number of The American Legion Post)

American Legion  
 Post Athletic Officer:      \_\_\_\_\_  
 Name  
 \_\_\_\_\_  
 City, State, Zip

\_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Phone number

Team Manager:  
 (Person responsible  
 for the team).      \_\_\_\_\_  
 Name  
 \_\_\_\_\_  
 City, State, Zip

\_\_\_\_\_  
 Address  
 \_\_\_\_\_  
 Phone number

Field (Principal location of home games): \_\_\_\_\_  
 \_\_\_\_\_  
 Name  
 \_\_\_\_\_  
 Location

Has the Post previously sponsored a team?      Circle      Yes      No      \_\_\_\_\_ year?

Does the team and Post understand that they **must** purchase American Legion Baseball accident and medical insurance from S. A. Van Dyk Inc. before the first day of tryouts or practice? Circle Yes      No

Briefly describe your plan to finance the team: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

The above mentioned team is in good standing with The American Legion Post # \_\_\_\_\_. The Post and team pledges to participate in full compliance with the rules and regulations of The Department and the National Americanism Commission.

Date: \_\_\_\_\_

Signed: \_\_\_\_\_  
 Post Commander or Post Adjutant

# Application of an Outside Sponsoring Organization



**Sponsor:** \_\_\_\_\_  
(Full Name of Organization)

**Executive Officer:** \_\_\_\_\_  
(Elected/Appointed Head of Organization)

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

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

Day Time Phone Number \_\_\_\_\_

**Team Manager:** \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

**Field:** (Principal location of home games)? \_\_\_\_\_  
Name and location of ballpark \_\_\_\_\_

Has this organization previously sponsored an American Legion Team? Circle Yes No

Is the organization incorporated with Secretary of State? Circle Yes No

Is the organization a registered nonprofit 501(C) organization? Circle Yes No

If Yes above, who are it's principal directors? \_\_\_\_\_

Has anyone associated with the team been previously subjected to disciplinary action in American Legion Baseball? Circle Yes No If yes, explain on back of this page.

Does the team and sponsor understand they **must** purchase Baseball Insurance from S. A. Van Dyk Inc. before the first day of tryouts or practice: Circle Yes No

Briefly describe your plan to finance the team: \_\_\_\_\_

The above mentioned team and organization pledges to participate in full compliance with the rules and regulations of The Department Baseball Committee and the National Americanism Commission.

\_\_\_\_\_ Date

\_\_\_\_\_ President