



DGSA All Stars and Strikes Entry Form

PLEASE COMPLETE ENTIRELY

Name of League _____ Division (circle one) 8U 10U

League President _____ President Contact _____

Head Coach _____ cell _____ email _____

Roster	Name	DOB

I hereby confirm that all players meet the age requirements (8U- Girls must be 8 years old or younger as of January 1, 2019, 10U – Girls must be 10 years old or younger as of January 1, 2019). I hereby confirm that all players listed played on one of our leagues recreational teams during the spring 2019 in their respective division. This team is a true all-star team and not a travel team.

Coach Signature _____ Date _____

*Please enclose completed entry form, copy of insurance, and a check or money order made payable to DGSA and mail to DGSA, P.O. Box #481, Danville, IN 46122