

Baseball Atlantic Championship Host Application Form Prince Edward Island

Baseball PEI

40 Enman Crescent, Room 216 Charlottetown, PEI C1E 1E6 902-368-4203 (Tel.) 902-368-4548 (Fax)

<u>baseball@sportpei.pe.ca</u> <u>www.baseballpei.ca</u>

Please indicate which division you are applying to host:

· · · · · · · · · · · · · · · · · · ·		Classification	
11U	"AAA"	"AA"	
13U	"AA"		
15U	"AAA"	"AA"	
18U	"AA"		
	Host Team:		
Baseball PEI Representative	*		
Please note the Baseball PEI Representative m	ust not be a coach, manager or an immediate family member of any team v	within the competition	
*Please note the Baseball PEI Representative m	ust not be a coach, manager or an immediate family member of any team v		
*Please note the Baseball PÊI Representative m	ust not be a coach, manager or an immediate family member of any team v	Cell:	
*Please note the Baseball PÊI Representative m Name: Members of Host Committee	ust not be a coach, manager or an immediate family member of any team v	Cell:	
*Please note the Baseball PÉI Representative m Name: Members of Host Committee Chairperson:	Email: [Comparison of the a coach, manager or an immediate family member of any team of the second	Cell: of two other members) Cell:	
*Please note the Baseball PÉI Representative m Name: Members of Host Committee Chairperson: Person #2: Person #3:	Email:	Cell: n of two other members) Cell: Cell: Cell: Cell:	
*Please note the Baseball PÉI Representative m Name: Members of Host Committee Chairperson: Person #2: Person #3: Protest Committee Members	Email: Email: (Tournament Chairperson plus a minimum Email: Email: Email:	Cell: n of two other members) Cell: Cell: Cell: Cell:	
*Please note the Baseball PÉI Representative m Name: Members of Host Committee Chairperson: Person #2: Person #3: Person #3: Protest Committee Members	Email:	Cell: n of two other members) Cell: Cell: Cell: Cell:	
*Please note the Baseball PÉI Representative m Name: Members of Host Committee Chairperson: Person #2: Person #3: Protest Committee Members *Please note Baseball PEI Representative will a Person #1:	Email:	Cell:	