



Xenia Scouts Youth Baseball Tournament Registration Form

Tournament Date: ____/____/____

Age Group: _____

Team Name: _____

City: _____ State: ____ Zip: _____

Coach: _____

Best Contact Phone: (____) ____-_____

Email: _____

Payment Information:

Checks Payable to: "Athletes in Action"

Mail checks to:

651 Taylor Drive

Xenia, OH 45385

Send Registration for to: Brady Pfister

brady.pfister@athletesinaction.org