



ATWATER BOMBERS BASEBALL CLUB

P.O. Box 1280
Atwater, CA 95301

School Enrollment Form

Note: Atwater Bombers will retain this form and any supporting documentation for their files only. Once completed this form will remain in effect unless the school enrollment changes.

This portion to be completed by Parent or Legal Guardian: **Date:** _____, 2024

ORGANIZATION NAME: ATWATER BOMBERS BASEBALL CLUB, a non-profit organization ID# 05283539

Player/Student Name:

PLEASE PRINT NAME

Date of Birth: _____

DIVISION OF PLAY: BASEBALL MINOR MAJOR INTERMEDIATE

PARENT OR GUARDIAN ADDRESS:

PRINT NAME OF PARENT/GUARDIAN:

PARENT/GUARDIAN SIGNATURE: _____ **DATE:** _____

This portion to be completed by school administrator, Principal, Vice Principal

I, _____ of _____
PLEASE PRINT NAME NAME OF SCHOOL

School, located at

_____, CA
PLEASE PRINT ADDRESS WITH ZIP CODE

School Phone: (209) _____ hereby verify that the above-named student has enrolled

and is/or will attend the above-named school for the 2024/2025 academic year prior to October 15, 2024.

Signature: _____ **Title:** _____
SIGNATURE TITLE