

Hawaii PONY Baseball, Inc.



School Enrollment Form



To be filled out by Parent/Legal Guardian

Program: ___ Baseball ___ Softball

Division: ___ Shetland ___ Pinto ___ Mustang ___ Bronco ___ Pony ___ Colt ___ Palomino

Date Requested: _____

League Name: _____

Player/Student Name: _____

Date of Birth: _____

Parent/Guardian Address: _____
(Street) (City/State) (Zip Code)

(Name of Parent/Legal Guardian - Printed)

(Signature of Parent/Legal Guardian)

(Date)

To be filled out by School Administrator, Principal or Vice Principal

I, _____ of _____ School, located at
(Print Name) (Print School Name)

_____. Hereby verify that _____
(Physical Address) (Student Name - Printed)

has enrolled and is attending named school location for the _____ academic year prior to
(Year)
October 1st, of the current year. This student has been enrolled as of _____.
(Date)

Our records on file also verify the student, student's physical address, residing with the Parent/Legal Guardian as listed above.

(Signature)

(Date)

Title (School Administrator, Principal or Vice Principal)

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If the Tournament Director(s) subsequently finds that the information submitted as acceptable documentation regarding school enrollment/attendance now shows that the previously submitted information/documentation was falsified, misrepresented or insufficient then Hawaii PONY Baseball, Inc. reserves the right to impose sanctions and/or penalties on all appropriate parties, including but not limited to players, coaches, league officials and/or league which could result in suspension and/or termination with PONY Baseball, Inc. and elimination of tournament team.

The Region and Local League will maintain this form and supporting documentation in their files. Completion of this form is only required ONCE during a participant's career, unless the school enrollment changes. An updated form would then be required.