APPLICATION FOR FRANCHISE

Complete form and mail with check to:

TAR HEEL LEAGUES, INC, PO BOX 159, ZEBULON, NC 27597

OR

COMPLETE FORM DIGITALLY AND EMAIL TO:

tarheeladmin@gmail.com

to receive an Invoice or
Click HERE to pay online after
emailing the form.

PLEASE INDICATE NUMBER OF REGULAR SEASON TEAMS YOU ARE SANCTIONING IN EACH AGE GROUP.

(SANCTION FEES ARE $50 / TEAM)

BASEBALL

COACH PITCH (8U)	
MIDGET LEAGUE (10U)	
LITTLE LEAGUE (12U)	
JUNIOR LEAGUE (15U)	
TOTAL BASEBALL TEAMS	0

GIRLS SOFTBALL

COACH PITCH (8U)	
SOFTBALL (10U)	
SOFTBALL (12U)	
SOFTBALL (16U)	
TOTAL SOFTBALL TEAMS	0

TOTAL NUMBER OF TEAMS 0 X $ 50.00 $ 0.00

LEAGUE NAME _____

LEAGUE ADDRESS _____

_____

EMAIL ADDRESS _____

LEAGUE DIRECTOR CONTACT INFO _____

MOBILE OTHER

DOES YOUR LEAGUE USE A PLAYER SELECTION SYSTEM? ☐ YES ☐ NO

DOES A SPONSOR HAVE A VOICE IN LEAGUE AFFAIRS? ☐ YES ☐ NO

DOES YOUR LEAGUE CARRY INSURANCE? ☐ YES ☐ NO COMPANY _____

DOES YOUR LEAGUE WISH TO ENTER TOURNAMENT PLAY? ☐ YES ☐ NO

WOULD YOUR LEAGUE LIKE TO HOST A DISTRICT TOURNAMENT? ☐ YES ☐ NO

WOULD YOUR LEAGUE LIKE TO HOST A STATE TOURNAMENT? ☐ YES ☐ NO

AS DULY ELECTED PRESIDENT OF THE ORGANIZATION MENTIONED HEREIN, I HEREBY MAKE APPLICATION FOR A FRANCHISE AND FOR THE RIGHT TO CONDUCT A BASEBALL AND/OR SOFTBALL PROGRAM UNDER THE NAME OF **TAR HEEL LEAGUES, INC.,** FOR THIS YEAR. THIS APPLICATION IS ACCOMPANIED BY A REGISTRATION FEE WHICH I UNDERSTAND WILL BE FULLY REFUNDED IF MEMBERSHIP IS NOT APPROVED. I PLEDGE MYSELF AND MY LEAGUE TO STRICT COMPLIANCE OF ALL THE RULES AND REGULATIONS OF THE ORGANIZATIONS.

SIGNED: _____ DATE: _____

PRESIDENT