



2025 WBS Colts Registration Form

CHOOSE TOUR(s)

June 15-24, Omaha – Ages 15-19 (____)

June 25- July 23, Ages 15-19, West Coast (____)

August 4-22, Ages 12-19 Cross Country (____)

Name: _____ Parent Email: _____

Address: _____ City: _____

Zip Code: _____ State: _____ Emergency Phone: _____

High School: _____ Graduation Year: _____

Date of Birth: _____ Position(s): _____

Parents Names: _____

Hat Size (XS-S, S-M, L-XL): _____ Shirt Size: _____

Preferred Jersey Number (List 6 numbers in order of preference): _____

Bats:(L/R/S): _____ Throws:(L/R): _____ Height (Inches): _____ Weight (Pounds): _____

Sandwich Meat Preference (Roast Beef, Turkey, Ham, PB&J): _____

Allergies/Medications/Existing Conditions: _____

Colleges/Universities interested in: _____

College/University committed to: _____

Cross Country Registration ONLY:

Family Member Names (Those who are on parent package for entire tour)

1) _____ Hat Size (XS-S, S-M, L-XL): _____ Shirt Size: _____ Meat Preference: _____

2) _____ Hat Size (XS-S, S-M, L-XL): _____ Shirt Size: _____ Meat Preference: _____

3) _____ Hat Size (XS-S, S-M, L-XL): _____ Shirt Size: _____ Meat Preference: _____

4) _____ Hat Size (XS-S, S-M, L-XL): _____ Shirt Size: _____ Meat Preference: _____

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