## 2028 DREAMS PARK REGISTRATION ROAD TO COOPERSTOWN - BIG LEAGUE PACKAGE

(subject to change/non-transferable)

This is your *invitation* to register for the summer of 2028 to experience and play baseball in the legendary home of baseball. Each team shall consist of a minimum of 11 Players and 2 Coaches.

## The Road to Cooperstown Base Package of \$1,295 per Player/Coach Includes:

- Player Uniform (hat, home and away jerseys, and socks)
- Player Warm-up Set (two performance shirts, batting practice jacket)
- Coaches Gear (hat, two polos, pullover and jacket)
- Meals (breakfast, lunch and dinner)
- Accommodations (players, coaches, umpires)
   Team Clubhouses are fully air-conditioned

- 6 Games Guaranteed / 13 Games Max (weather permitting)
- Team scorebook, lineup cards, backpack and ball bucket
- Uniform Cleaning Service (players, coaches, umpires)
- \*Umpire Gear (pullover, hat, two polos, water bottle)
- Induction into the American Youth Baseball Hall of Fame
- American Youth Baseball Hall of Fame Tournament Ring

\*One Umpire selected from Cooperstown Dreams Park's Umpire Program is required per Team and will be added to the Team Roster.

	(All fees are non-refundab \$ 1,000 Deposit \$ 3,000 Second Installmen Final balance due (guaran posit are received, you will be s October 1, 2027. Added to you	ent a confirmation of deposi ir final balance due will be a ceMaker-Photo/Video Pass. of their Studio Session tean	nstallment) t letter. Written noti mandatory facilities n photo and personal	fee \$800 and an optional \$1,295 ized baseball cards.
Please indicate preferred tournament	date(s), with 1 being your fi	st choice. Only indicate th	e tournament date(	s) that your team can participate.
May 28 thru June 3 June 3 thru June 9 June 9 thru June 15 June 15 thru June 2 June 21 thru June 2	<u> </u>	June 27 thru July 3 July 3 thru July 9 July 9 thru July 15 July 15 thru July 21 July 21 thru July 27		July 27 thru August 2August 2 thru August 8August 8 thru August 14August 14 thru August 20August 20 thru August 26
Team Name:	A P.	454	Team Ci	ty:
Team Contact Person:			: W / A	
Address:				
City:		_ State:	ZIP Code:	
Cell Phone Number:	Additional Phone Number:			
Additional Phone Number:				
E-mail Address:				
Returning Team/Organizat	ion Yes:No:	If yes, what year:	V	
Head Coach/Manager:(Please Print)				

All payments must be in the form of a <u>CASHIER'S CHECK or U.S. MONEY ORDER ONLY!</u>
Make payable and send to: <u>Cooperstown Dreams Park</u> 330 South Main Street, Salisbury, NC 28144
Phone: (607) 547-4061 Fax: (607) 548-0330 Web Site: www.cooperstowndreamspark.com

Cooperstown Dreams Park reserves the right, at any time, to modify or cancel a team's registration or placement.

Failure to comply with Dreams Park requirements, policies or deadlines may result in cancellation of a team's registration or placement.

Cooperstown Dreams Park prohibits the sale of a team's registration or placement.

The Team Contact is the only person eligible to discuss and/or change team information.