

You are 14u... if you are 14 years old or younger on 4/30/2026



- → Tryout Info
- → Fall Season Details



# Eagles Baseball... Fall 2025



# What's Included...

REGULAR SEASON LEAGUE PLAY & PLAYOFFS

WEEKLY PRACTICE THRU THE SEASON

## **14u TEAM DETAILS**

- → 14u plays on 60/90 field; modified major league rules
- League games are played in the USABL
- → Regular season games + 1 guaranteed playoff game
- 7 week regular season
- League games are played on Saturday's
- Opening Day is September 6th
- Games in Bergen County and surrounding counties
- → Game times vary according to whom / where we play.

## PRACTICE DETAILS

Weekly Practice thru the season at PBI

Wednesday 8/20/25....7:00pm—8:30pm ... at PBI Wednesday 8/27/25... 7:00pm—8:30pm ... at PBI Wednesday 9/03/25... 7:00pm—8:30pm... at PBI

Wednesday, September 10th and continuing every Wednesday thru the season... 7:00pm—8:30pm

#### <u>UNIFORMS</u>

Uniform includes> Jersey, Pants, Hat

Players new to the Eagles will need a full uniform. Full uniform fee is \$135.00 Additional uniform pieces available for Returning Players as well a New Players

## <u> 2025 PRICING</u>

14u Fall Eagles Team... \$899.<sup>99</sup>

(Uniform fees are additional... \$135.00 for full uniform)

#### **TRYOUTS**

#### **PRIVATE TRYOUTS**

Available 7 days a week

Call 201-760-8720 ...or... email deb@baseballclinics.com



#### Professional Baseball Instruction, Inc.

1300 Route 17 North, Ramsey, NJ 07446

1-800-282-4638

### www.BASEBALLCLINICS.co















# 14u Fall 2025... REGISTRATION... PAYMENT... AGREEMENT

| Players Name: DOB:                                                                                                                                                                                                                                                                                             | THE INFO BELOW IS IN ANTICIPATION OF YOUR SELECTION TO THE TEAM.  Players will not be permitted to tryout if the sections below are not completed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Address:                                                                                                                                                                                                                                                                                                       | <b>✓</b> 14U Fall Eagles Team \$899.99                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| City: State: Zip:                                                                                                                                                                                                                                                                                              | Team Fee (\$899.99) + (Uniform fees if applicable)  I need uniform JERSEYsize+ \$50.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Father's Name: Mother's Name:                                                                                                                                                                                                                                                                                  | ☐ I need uniform HAT+ \$25.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Father's Cell: Mother's Cell:                                                                                                                                                                                                                                                                                  | ☐I have Eagles jersey # GRAND TOTAL \$  PAYMENT DUE DATES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Parent's Email(s):                                                                                                                                                                                                                                                                                             | ✓ 50% of Total Due upon selection to team\$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Parent's Email(s):                                                                                                                                                                                                                                                                                             | NOTE: You are considered as on the team at the time your registration is processed. 50% of the total fee is due upon being selected for the team. The balance is due by 9/1/25. Team portion of the fee (\$899.99) covers practices and PBI League fall season. Uniform                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Primary Position: Alternate Position(s): Do you?                                                                                                                                                                                                                                                               | fees are additional.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Please Note roster spots will be awarded to players at the sole discretion of PBI on a first come—first served basis.  PBI reserves the right to cancel a tryout date in the event the roster becomes complete prior to a tryout date.  Tryout Location>>> PBI—1300 Route 17 North, Ramsey, NJ (Ramsey Square) | PAY BY CREDIT CARD Visa, Master Card, American Express  50% of the total fee will be processed to the credit card listed below upon being selected to the team. The balance of fees will be processed to the credit card listed below according to the schedule outlined in the "Payment Due Dates" section.  Card # Exp CVV:  NOTE: A 3% convenience fee will be charged to all credit card transactions. You can avoid this fee by payment cash or check.  PAY BY CASH / CHECK (made out to cash)                                                                                                                                                                                            |
| PRIVATE TRYOUTS To schedule a tryout call 201-760-8720or email deb@baseballclinics.com                                                                                                                                                                                                                         | PAY BY CASH / CHECK (made out to cash) You must provide a credit card even if paying by cash/check. Cash/check payments must be presented by the payment due dates 8:00PM, otherwise, PBI will process payment to the credit card listed below.                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| PRIVATE TRYOUT Date/Time: Coach:                                                                                                                                                                                                                                                                               | Card # Exp CVV:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                | ***REFUND/CANCELLATION POLICY ***                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| YOU WILL BE ADVISED OF YOUR STATUS WITH THE TEAM  WITHIN 7 DAYS VIA EMAIL  There are three possible outcomes 1) Yes 2) No 3) Wait List  **add deb@baseballclinics.com to your address book to insure you receive the email**                                                                                   | Absolutely NO cash refunds under any circumstance. All players are required to attend all practices and game PBI cannot provide make-up times for any missed practices, games, cancellations due to weather, or cancel tions of any kind; nor will PBI issue any credit vouchers for the same. You are considered as on the team at time your registration is processed. In the event a player discontinues with the team prior to 9/1/25; monies processed to that date towards the team fee may be prorated in the form of a PBI credit voucher – less a \$100.00 administ tive fee. In the event a player discontinues with the team on or after 9/1/25; no refunds or credit vouchers will |
| ☐ Private Tryout: \$50.00                                                                                                                                                                                                                                                                                      | issued at all.  CONFIRMATION OF AGREEMENT: I hereby agree to the above stated conditions of the 2025 PBI Fall Eagles policies. I have provided my credit can be above stated conditions of the 2025 PBI Fall Eagles policies.                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Accepted Methods of Payment:  Visa  Master Card  AMEX  Cash  Check (made out to cash)                                                                                                                                                                                                                          | information within & authorize PBI to charge said credit card for all fees associated with the Fall Eagles.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| CARD# Exp CVV:                                                                                                                                                                                                                                                                                                 | Signature:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Please review and complete opposite side of this page >>>>                                                                                                                                                                                                                                                     | Print Name: Date:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| i lease leview and complete opposite side of tills page ////                                                                                                                                                                                                                                                   | Are either parents/guardians a current member of the US military? ☐YES ☐NO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |