



# INVOICE for Annual Franchise Fees

Please check one:

Majors (60') \_\_\_\_\_

O-Zone (70') \_\_\_\_\_

**Dixie Youth Baseball, Inc.**

Wes Skelton, Commissioner

P.O. Box 877 Marshall, TX 75671-0877

National and State Fees **Due on or Before April 1, 2008**

Do not mark in this area.

YOUR NATIONAL AND STATE FEES ARE NOW DUE. Please complete this form to franchise your league for the current season. Dixie Youth Baseball, Inc. requires all franchised leagues to register all teams participating in your league. The annual league franchise fees must be paid prior to your league's first regular season game. Franchise fees paid after April 1, will result in the assessment of a \$50.00 late penalty.

League Teams (Maximum of 7 Teams in Any Division)

Number of Teams

Majors Teams (12 and Under)	<input type="text"/>	@ \$10 per team	_____
AAA Teams (10 and Under)	<input type="text"/>	@ \$10 per team	_____
AA Teams (8 and Under)	<input type="text"/>	@ \$6 per team	_____
A Teams (6 and Under)	<input type="text"/>	No Fees for A Teams	<u>\$50.00</u> <i>Late fee after 4/1</i>
<b>TOTAL Teams</b>	<input type="text"/>		
		<b>State Fees</b>	<u>\$25.00</u>

Total Fees Enclosed \_\_\_\_\_

Franchise #: Y \_\_\_\_\_ District #: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Make check payable to Dixie Youth Baseball, Inc.

<u>League Officials:</u>	<u>Name</u>	<u>Address</u>	<u>City, State Zip</u>	<u>Daytime Phone Number</u>
President	_____	_____	_____	( ) _____
Vice President	_____	_____	_____	( ) _____
Secretary	_____	_____	_____	( ) _____
Treasurer	_____	_____	_____	( ) _____
Player Agent	_____	_____	_____	( ) _____
Safety Officer	_____	_____	_____	( ) _____

On what date will the first game be played? \_\_\_\_\_ How many games have been scheduled for each major league team this season? \_\_\_\_\_

"I certify this league will comply with all organizational requirements such as boundary requirements, playing rules, player selection, etc. as outlined in the current edition of the Official Dixie Youth Rules and Regulations. In addition, I understand the National Board of Directors of Dixie Youth Baseball, Inc. strongly recommends all franchised leagues adopt and implement a child abuse/molestation risk management program. Our league understands that guidelines for establishing a child abuse/molestation risk management program are available at no charge through the DYB national office, or the league may develop a similar comprehensive program. Due to the fact that Dixie Youth Baseball, Inc. has no operational control over league security including the selection of local league volunteers, our league understands it is solely responsible for adopting and implementing a child abuse/molestation risk management program. Therefore, as a condition to maintaining its DYB franchise rights, our league hereby indemnifies and holds harmless Dixie Youth Baseball, Inc., and its officers, directors, state and district officials, and administrative employees, (collectively the "releasees"), for any legal action, including reasonable attorney's fees, based on child abuse/molestation allegations including any allegation of negligence on the part of any or all of the releasees, arising from any team, league, tournament, or other activities of our league."

Signed \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_ **Deadline is April 1st to avoid penalty**

Please mail a copy of completed form to your District and State Directors. Names and address can be found on our website at [www.dixie.org/dyb](http://www.dixie.org/dyb) under OFFICIALS. Rosters are due May 1 and are to be mailed to your state and district directors. Rosters should not be included with this form to the Commissioner. Please keep a copy of completed form for your records.

