Hall of Fame Bats

- Established in 2006 -

Game Used Bat Authentication Submission Form

Name _____
Street Address _____
City _____
State _____Zip Code_____
Phone_____
Email Address _____
Additional Instructions _____
_____
_____
_____
_____
_____

Please send this form and your item to:
Tim Byington
325 Drier Street
Durand, WI 54736

***Be sure to keep a copy of this form for your records. Payment must be included at the time of submission unless previous arrangements have been made. Check or money order should be made payable to *Tim Byington*.**

Item Type	**Player Name**	**Fees***

Total Fees: _____

Please contact me if you are unsure of the amount.

NOTICE:
****I reserve the right to reject any submission at any time, for any reason. If I'm not absolutely comfortable that a submitted item is 100% authentic I will not issue a letter of authenticty on that item. Item will be returned to the owner with reason(s) for rejection. Fees are non-refundable.**

Submission Agreement

By signing below, I do hereby attest that the item I have submitted for authentication is, to the best of my knowledge, unaltered and original. Any repairs or restorations must be disclosed at the time of submission. I understand that if my item is found to not be authentic it will be returned to me and any fees paid will not be refunded.

Signature _____
Date _____