Registration Form for <u>WINTER WORKOUT PLAYERS</u> With Maine Thunder <u>2019-2020 Travel Softball Program</u>

Player Name:			D.O.R:	Age: ₋	
Players Tshirt s	ize (women's or youth): Short sleeve: _	 	Favorite #: _	
Parent(s) Name:					
Address:			_ City:		
Home Phone:		Work Phone:			
Parent's Cell: Da	d:	Mom's Cell: _			
Email:					
Additional E-mai	il(s):				
	off-season goals for				
Player Position	ns:(in order please; don't			he doesn't play :	3 positions)
1					
	2 installments (\$400 c				
•	12u = \$695	•		• •	•
Check #:	(please make CK out to	EDGE ACADEMY - n	nark players na	ne on bottom lef	t of check)
Credit Card#			Exp:	Code	ટઃ
	t card # above be run fo	• •		? YES	NO