

**SAINT MARGARET MARY
SPARTAN BASEBALL REGISTRATION FORM – 2010**

FAMILY LAST NAME: _____
STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
HOME PHONE #: _____
PARENT NAMES (2nd address on back of form if parents do not live in same home): _____
PARENT CELL PHONE #(S): _____
PARENT WORK #(S): _____
E-MAIL ADDRESS(ES): _____

IS PARENT WANTING/WILLING TO COACH?? YES _____ NO _____

PAYMENT REQUIRED AT TIME OF REGISTRATION!
PLEASE MAKE CHECKS PAYABLE TO: SMM or SAINT MARGARET MARY

2010 BASEBALL FEES:

FIFTH/SIXTH GRADE:	\$135
SEVENTH/EIGHTH GRADE:	\$160

PLAYER INFORMATION:

<u>PLAYER FULL NAME:</u>	<u>GRADE:</u>	<u>FEE:</u>
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1. _____
2. _____
3. _____
4. _____

PLEASE MAKE SURE THAT ALL INFORMATION ON THIS FORM IS COMPLETE, AND PAYMENT IS ATTACHED. ALL REGISTRATIONS MUST BE RECEIVED BY WEDNESDAY, FEBRUARY 10, 2010. IF YOU HAVE ANY QUESTIONS, PLEASE CALL CRAIG KELLEY @ 391-4000 by day, or 681-2853 by night. IF YOU DESIRE TO COMPLETE REGISTRATION BY MAIL, PLEASE MAIL THIS FORM AND PAYMENT TO:

CRAIG KELLEY
703 NORTH 57TH STREET
OMAHA, NE 68132-2033
