

MABC Fall Clinic Form
October 23 – 24, 2009
Colby College

Please mail to address below with check included.

Fall Clinic 2009 - Friday and Saturday, October 23rd and 24th

Cost: \$50.00 for MABC members
\$100.00 for a staff whose program is a members of MABC (limit 6)
\$75.00 for non-members

Cost includes note pad and lunch.

MABC 2009 Clinic Form

Name: _____

Home Mailing Address: _____

City / Town and State: _____

Zip Code: _____

School: _____

Boys: _____ Girls: _____ Level: _____

School Mailing Address: _____

City / Town / State: _____

Zip Code: _____

Home Phone: _____

Work/School Phone: _____

Cell Phone: _____

School Fax #: _____

EMAIL Address: _____

Make checks payable to: MABC

Return to:
George Conant
88 Burnham Road
Scarborough, ME 04074