

## MABC Clinic / Membership Form 2006-07

Please print out form and mail to address below with check included.

### Fall Clinic 2006 Friday and Saturday, October 6<sup>th</sup> and 7<sup>th</sup>

**Cost:**

MABC member at the door = \$80. (includes MABC membership and clinic registration)

Nonmembers and out of state coaches = \$75. (clinic registration only)

\*Staff (up to six coaches) = \$150. (includes staff MABC membership and staff clinic registration)

\*(gender specific – boys or girls)

## MABC Clinic / Membership Form 2006-07

Name: \_\_\_\_\_

Home Mailing Address: \_\_\_\_\_

City / Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School: \_\_\_\_\_

School Mailing Address: \_\_\_\_\_

City / Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work/School Phone: \_\_\_\_\_

Region: \_\_\_\_\_ Classification: \_\_\_\_\_ School Fax #: \_\_\_\_\_

EMAIL Address: \_\_\_\_\_

If signing up as a staff membership please include the names of your assistants below.

	Coach's Name	Level Coached
Coaches (staff membership)	_____	V JV FR MS
Specify gender.	_____	V JV FR MS
<b>Boys or Girls</b>	_____	V JV FR MS
	_____	V JV FR MS
	_____	V JV FR MS

Make checks payable to: MABC

Return to:	Jim Seavey	<b>Amount Enclosed (circle one)</b>	
	Greely High School	MABC Membership	\$30
	303 Main Street	Staff MABC Membership	\$60
	Cumberland, Maine 04021	Staff MABC Membership and clinic fee	
		\$150 up to 6 coaches	