

TO: **Grade 6 to 8 Boys & Parents (Grade in Fall 2010)**

DATE: **June 9, 2010**

SUBJECT: **Varsity Baseball Sign-up/Registration**

FEE: **\$40.00 (non-refundable) per player**

The upcoming fall baseball season will be here before you know it, with practices starting in late August. Games can begin before school opens for the new year. Please complete the sports registration form below, enclose payment*, and forward to the school office by **Friday, June 18th**. Please fill out one form per athlete. The coaches will be contacting you mid-summer regarding practices and game schedules. If you need extra registration, permission or medical release forms, they are available in the school office. Any questions, please call Mary Pappano @ 773-0194. Thank you.

PLEASE NOTE THAT STUDENT ATHLETES MUST HAVE A COMPLETED SPORTS PERMISSION FORM AND MEDICAL RELEASE FORM ON FILE IN THE SCHOOL OFFICE BEFORE THEY CAN START PRACTICE.

ST. STEPHEN VARSITY BOYS BASEBALL REGISTRATION Fall 2010

NAME OF STUDENT _____ DATE OF BIRTH _____

GRADE _____ NAME OF PARENT(S) _____

HOME PHONE _____ WORK PHONE _____

(Parent/Guardian Signature) (Date)

_____ I am interested in coaching or assisting the team.

*Amount Enclosed \$ _____

**Please make checks payable to St. Stephen School

Sports Permission Form; _____ enclosed _____ on file in office
Medical Release Form; _____ enclosed _____ on file in office