



2012 National Level clinic
Kamloops, BC - March 29 to April 1, 2012

Application for Registration - by invitation

DEADLINE FOR REGISTRATION: February 15, 2012

FIRST - SUBMIT the following to George Smith at gss112@shaw.ca
or telephone: home 604-271-3889

Name (First and Last): _____ Phone (home): _____ Email: _____
Indicate: **Not attending the clinic, but wish to remain part of the Program**
OR Not attending the clinic, no longer interested in the Program
OR Yes I am attending, I am flexible (any dates)
OR Yes I am attending, I can work Thursday-Friday
OR Yes I am attending, I can work Saturday-Sunday
OR Yes I am attending, I can work Friday-Sunday

SECOND - PRINT this form, complete the information below and mail form and payment to

Secretary, BCBUA
10451 Ainsworth Cres
Richmond, BC V7A 3V5

Last Name: _____ First Name: _____ Gender: M F (circle one)
Date of Birth: (mm/dd/yyyy): _____
Mailing Address: _____
City: _____ Postal Code: _____
email: _____ (underline numerals)
Home phone: _____ Work: _____
Cell: _____ Fax: _____

The undersigned authorizes BCBUA to release this information to baseball leagues and/or allocators

Signature: _____ Date: _____

Payment: **\$TBD** - Includes Prov and National membership, Travel contribution, clinic fee

OR **\$175** - Includes Prov and National membership, Travel contribution

Cheque (payable to BCBUA) enclosed **OR** Bill my Credit Card: (Circle one) Visa Mastercard

Number: _____ Exp date: _____

Cardholder exact name: _____