



St. Benilde Men's Club

SUMMER CABBAGE BALL PROGRAM

2018 REGISTRATION

Open to boys and girls currently in grades Pre-K4 to 12th

FEE: \$20.00 per child before April 13, 2018 (includes insurance fee, free icees after each game, and a team shirt).

\$25.00 per child between April 14 and April 27, 2018, \$35.00 per child after April 28, 2018

REGISTRATION: At St. Benilde School & Parish Office, 1801 Division St., Metairie, LA 70001 beginning March 12, 2018.

Make check payable to St. Benilde Men's Club.

If you have any questions, e-mail or call Phil Borne, pjborne@christovich.com - 228-7573.

DAYS & TIME OF PLAY: Tuesday & Thursday Nights. **May 22 to June 28, 2018**

Pre-K4 and Kindergarten Division - 6:00 p.m. to 6:50 p.m.

Grades 1 - 3 Division - 7:00 p.m. to 7:50 p.m.

Grades 4 - 7 Division - 8:00 p.m. to 8:50 p.m.

Grades 8 - 12 Division (co-ed) - 9:00 p.m. to 9:50 p.m.

Concessions will be available for purchase each night until 9:15 p.m.

BRING OUT THE WHOLE FAMILY!

PLEASE CUT ON THE LINE AND SUBMIT REGISTRATION FORM BELOW - ONE FORM PER PARTICIPANT

2018 REGISTRATION FORM

Child's Name: _____ Sex (M, F) _____

Address: _____ Telephone: _____

Date of Birth: _____ Current Grade: _____ School: _____

Interested in coaching? Name: _____ Coach's Shirt Size (if coaching) _____

Shirt Size for Child (CHECK ONE BOX BELOW): Material - 50% cotton 50% polyester

NOTE: TEAM SHIRTS ARE REQUIRED FOR TEAM PLAY, NO EXCEPTIONS.

YOUTH SMALL 6/8	YOUTH MEDIUM 10/12	YOUTH LARGE 14/16	ADULT SMALL 34/36	ADULT MEDIUM 38/40	ADULT LARGE 42/44	ADULT XLARGE 46-48	ADULT XXLARGE 49/52	ADULT XXXLARGE 53/60
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please check appropriate shirt size for child

FEEs: Registration (\$20.00) _____ + Extra team shirt (\$9.00) (optional) _____

Late Registration (\$25.00 or \$30.00) _____ + Extra team shirt (\$9.00) (optional) _____

TOTAL DUE \$ _____

Attach fees to this form before submitting.

PARENT or GUARDIAN - NAME (PLEASE PRINT): _____

PARENT or GUARDIAN - SIGNATURE: _____

PARENT or GUARDIAN - E-MAIL ADDRESS: _____

St. Benilde Men's Club

SUMMER CABBAGE BALL PROGRAM

Team Sponsor Form – 2018

Name of Sponsor: _____ Sponsor's Phone: _____

Sponsor's Address: _____

Contact's Name: _____ Contact's Phone: _____

You will receive 2 team shirts for your donation as a token of our thanks. Please list what sizes you would like the shirts to be: (1) _____ (2) _____

AUTHORIZED SIGNATURE: _____

IF YOU HAVE NOT SPONSORED A TEAM PREVIOUSLY, PLEASE ATTACH TO THIS SHEET A BUSINESS CARD OR OTHER INSTRUCTIONS TO BE PRINTED ON THE BACK OF EACH SHIRT

- Enclosed is \$150.00 to sponsor a team in the St. Benilde Men's Club Summer Cabbage Ball Program. Please print the information requested above:

* * **PLEASE SUBMIT NO LATER THAN MAY 4, 2018** * *

BAT AND BALL SPONSOR - 2018

- Enclosed is \$15.00 toward the purchase of a BAT.
- Enclosed is \$10.00 toward the purchase of a BALL.
- We wish for our donation(s) to remain anonymous. Yes: _____ No: _____*

Donated By: _____

Street: _____ Phone: _____

City/State/Zip: _____

AUTHORIZED SIGNATURE: _____

CONCESSION SPONSOR - 2018

- I would like to donate \$ _____ towards concessions (50% donation to concession booth - The other 50% will be given back to you in tickets for your concession purchases).
We wish for our donation(s) to remain anonymous. Yes: _____ No: _____

Donated By: _____

Street: _____ Phone: _____

City /State/Zip: _____

AUTHORIZED SIGNATURE: _____