

LONG ISLAND TITANS

"A PREMIER BASEBALL ENVIRONMENT"

2012 Myrtle Beach Spring Training Trip: February 19th-24th

REGISTRATION FORM- DEADLINE MONDAY JAN. 9TH

FIRST: _____ LAST: _____ AGE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

E-MAIL ADDRESS: _____

PRIMARY PHONE: _____ CELL PHONE: _____

HIGH SCHOOL: _____ GRAD. YEAR: _____

CURRENT SUMMER TEAM: _____

DOB: _____ POSITIONS- PRIMARY & SEC.: _____

HEIGHT: _____ WEIGHT: _____ BATS: _____ THROWS: _____

HAT SIZE: _____ PANT SIZE: _____ JERSEY SIZE: _____

EMERGENCY CONTACT #1 NAME: _____

EMERGENCY CONTACT #1 PHONE: _____

EMERGENCY CONTACT #1 NAME & PHONE: _____

TOTAL # PLAYERS ATTENDING: _____ TOTAL # FAMILY ATTENDING: _____

Payment Information:

PLAYER FEE: \$765

FAMILY MEMBER FEE: \$595

CHECK OR CC

CC# _____ Exp: _____

Name on Card: _____ Security Code: _____

** Please make all checks & money orders payable to: Long Island Titans

** Please mail too: Long Island Titans PO Box 157 Bayport, NY 11705 (attn: Paul Carufe)
or fax to 631- 676-2532

THIS IS A FIRST COME FIRST SERVE BASIS. PLEASE REGISTER QUICKLY