2008 Jr SaberKitten Application Form

AGES 6-13

CONTACT INFORMATION (Parent or Guardian must complete one form for each participant)

PLEASE PRINT CLEARLY IN BLACK INK.

Participant Name	Date of Birth Age:
Parent/ Guardian Name	Email -MANDATORY
Mailing Address	Apt #
City	Zip
Day Phone (Include area code)	Evening Phone (Include area code)
Practice and Game Day/ Emergency Contact name:	Emergency Contact Phone (include area code)

T-SHIRT SIZING INFORMATION:

Participant T-Shirt Size ___ Child S ___ Child M ___ Child L ___ Adult S ___ Adult M ___Adult L

Extra T-Shirt Size ___ Child S ___ Child M ___ Child L ___ Adult S ___ Adult M ___Adult L

FEES	QUANTITY	PRICE	TOTAL
Participation Fee - Includes t-shirt, poms and 5 game day tickets (1 for participant and 4 for guests)	1	$80.00	$80.00
Extra Tickets (Discount price valid through May 1, 2008)		$13.00	$
Extra T- Shirts		$10.00	$
TOTAL AMOUNT DUE:			$

PAYMENT OPTIONS: Payments by check must be mailed to SaberCats front office. Payments by credit card may be mailed or faxed to (408) 573-5588. Credit card payments must include 3-digit CV # found on the back of the card).

CHECK: Check Number_____ Total Amount_____

CREDIT CARD: (circle one) VISA MASTERCARD DISCOVERCARD AMERICAN EXPRESS

Credit Card Number:_____ **CV #:**_____ Expiration Date:_____

Name on Credit Card:_____ Total Amount:_____

**Make checks payable to "San Jose SaberCats". Attach payments to enrollment forms and mail to:

San Jose SaberCats, ATTN: Laura McCormick
600 East Brokaw Rd.
San Jose, CA 95112

REGISTRATION DEADLINE: May 1, 2008. Space is limited to the first 120 applications received. Applications accepted on a first-come, first-served basis. If application is received after the 120 limit, your payment will be returned in full. Ages 6-13 years old only.
IMPORTANT: NO REFUNDS GIVEN UNDER ANY CIRCUMSTANCE, NO EXCEPTIONS.

_____ _____

Parent or Guardian Signature *Date*

SaberCats contact information:
Laura McCormick: 408-573-5577
Email: lmccormick@sanjosesabercats.com