



2008 SCBCA Baseball Clinic
Dates: Jan 18-19
Clinic Registration Form

Name _____ School _____

Address _____

Work Phone _____ E-mail _____

Check one: [] Head Coach [] Assistant Coach [] Other: _____

Vendors/Sponsors Only
Business Name: _____
Contact Person: _____
Phone: _____ E-mail _____
Company/Business Website: _____

[] Vendor's Table only \$100.00 _____

[] Website Sponsor only (Sponsor page) \$100.00 _____

[] Vendor's Table and Website Sponsor \$150.00 _____

[] Major Website Sponsor (Logo appears on all pages) \$100.00 _____
(in addition to Website Sponsorship)

[] SCBCA Clinic Registration \$45.00 _____

After January 1 \$55.00 _____

[] FCA Breakfast Included (check if eating) _____

If you register on Saturday morning to attend the breakfast, there will a charge of \$10.00.

[] Students (Grades 7-12 Sat. only) \$10.00 _____

[] Captain's Choice Golf Tournament \$30.00 _____

Total Enclosed _____

Mail checks and registration to:

Pelion High School
Attn: Barry Fogle
600 Lydia Drive
Pelion, S.C 29123