



**ANDERSON BASEBALL FEBRUARY VACATION CAMP REGISTRATION FORM**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY, STATE, ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

**COST: \$150.00**

**PAY BY CREDIT CARD:**

TYPE OF CARD (CIRCLE ONE): VISA      MASTERCARD      DISCOVER

CREDIT CARD NUMBER: \_\_\_\_\_

EXPIRATION DATE: \_\_\_\_\_ / \_\_\_\_\_ SECURITY CODE: \_\_\_\_\_

**PAY BY CHECK:**

WRITE CHECKS OUT TO 'ANDERSON BASEBALL ACADEMY'

SEND REGISTRATION FORM ALONG WITH CHECK OR CREDIT CARD INFORMATION TO:

ANDERSON BASEBALL ACADEMY  
P.O. BOX 6383  
HOLLISTON, MA 01746-6383

YOU CAN ALSO PAY BY CREDIT CARD OVER THE PHONE 508-259-4960