The Miracle League of Green Bay
Summer 2010 REGISTRATION

Please make checks or money orders payable to: Miracle League of Green Bay

Mail check, registration form, & RELEASE FORM to:

Paul Liegeois, Founder/Executive Director
Miracle League of Green Bay
2445 Shady Oak Drive
Green Bay, WI 54304

For additional information please call: 920-497-2298
E-mail: LiegeoisPaul@aol.com

- **I'm In Need of a Scholarship_____**

FEES (per athlete)_____$45.00_____
DEADLINE: _____April 9, 2010

_____ _____
Player Name Home Phone

_____
Street Address City State Zip

_____ _____ _____
Parent / Guardian **E-Mail** (Important) Work or Contact No.

M / F _____ Birthday _____ Age _____ School _____

Diagnosis _____

Special Needs or Requirements _____

Wheelchair _____ Walker _____ Other _____

Which type of Buddy would be best for your child? (Check One)

Adult_____Older Child_____Sibling_____Parent_____

Player Shirt Size: Youth: S M L XL or Adult: S M L XL XXL (please circle one)

Size Chart:	**YS**	**YM**	**YL**	**YXL**					
No. Size	**6-8**	**10-12**	**14-16**	**18-20**	**AS**	**AM**	**AL**	**AXL**	**AXXL**
Chest:	**24-26**	**28-30**	**32-34**	**36-38**	**34-36**	**38-40**	**42-44**	**46-48**	**48-50**

Payment Received _____ Check # _____Release Signed _____