Redbirds Baseball Clinic Registration Sign up online www.coldwaterredbirds.com

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Or send checks to: CAABC

6 Legg Ct. Coldwater

NAME		AGE
ADDRESS		CITY
	DARENT DUONES	
PHONE	PARENT PHONES	EMAIL

PLEASE BRING THIS WITH YOU FILLED OUT THE DAY OF THE CLINIC!

Please check correct box for session you are signing up for.

7-1 0 U	11-18∪
Early Session	Afternoon session

^{**}Make sure to print off and include signed waiver form**