

IBC Baseball/Game Ready Scout Day

Camp Registration Form

Camp Name: _____ Dates _____

Camp Director: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Visa #: _____ Exp. Date: _____

CCV# on back _____ Credit Card Zip Code _____

Name on Credit Card _____

Address for Credit Card _____

\$300 per event or \$500 for up to 10 events

Fax Credit Card Form to 863-401-9844 or email – chuck.grsd@yahoo.com

Check Payable to: IBC Baseball

**Mail to: IBC Baseball
P O Box 1052 – Eagle Lake, FL 33839**