MTsc U Special Needs League (SNL) Buddy Registration Form & Checklist

Spring 2017

Name:						<u></u>	
Email:				(for use for general SNL information)			
Cell Phone:()				(for use for texting of assignments)			
Address:							
City, State &	& Zip Code:						
Would you lik	ce to receive Co	mmunity Serv	vice Hours fo	rschool?			
		Community	/ Service Ho	urs			
of you	checked the box ur school's req nation <u>ONLY</u> fi	uired (if any) o	community s				
Please ched	ck your shirt s	ize for a free	game day	required jer	sey:		
	AS	AM	AL	XL	XXL		
MTsc U Spe	ecial Needs B	uddy Signati	ure:				
		D	ate:				
READ B	BUT DO NOT V	VRITE BELO	W THIS LIN Manager		ecked off by N	1Tsc U Buddy	
В	uddy T-Shirt (F	Required to be	e worn during	g all game s	essions by MT	sc U Buddy)	
(ř	uddy provided nours and signa nid-point and a	ature to be co	mpleted for a	community s		ation filled in by MTsc U at the	