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NAME _____ AGE _____

STREET ADDRESS _____ BEG/INT/ADV _____

CITY _____ STATE _____ ZIP CODE _____

E-MAIL _____ PHONE# _____

PROGRAMS
(PLEASE CIRCLE ONE)

PEE WEE JDI JDII JDIII ADVANCED/ELITE TRAINING

DAY & TIME 1ST CHOICE _____ SESSION NUMBER _____

DAY & TIME 2ND CHOICE _____

DAY & TIME 3RD CHOICE _____

Junior Development Registration