



# 2017 HIGH SCHOOL MEMBERSHIP FORM

Family Name \_\_\_\_\_

Parent First Name \_\_\_\_\_ Parent First Name \_\_\_\_\_

Address \_\_\_\_\_

Parent E-mail address\* \_\_\_\_\_ 2nd E-mail address \_\_\_\_\_

Telephone\* \_\_\_\_\_

\*REQUIRED

## Varsity Membership(s):

1) \_\_\_\_\_ \$60\* Each Player [ ] + \$20 Decal Package?

2) \_\_\_\_\_ \$60\* Each Player [ ] + \$20 Decal Package?

## JV Membership(s):

1) \_\_\_\_\_ \$60 Each Player Includes JV Decal Package

2) \_\_\_\_\_ \$60 Each Player Includes JV Decal Package

## Paid:

[ ] Check payable to "Northport Lacrosse Booster Club" Check No: \_\_\_\_\_

[ ] Cash

## Membership by Mail

Please mail to:

Northport Lacrosse Booster Club  
12 Essex Drive  
Northport, NY 11768

## Questions?

Email: [northportlaxboosters@gmail.com](mailto:northportlaxboosters@gmail.com)

**THANK YOU FOR YOUR SUPPORT! GO TIGERS!!**