

Tri County Academy  
Athletic Booster Club  
Membership Form

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Return form with check made payable to Tri County - P.O. Drawer K, Flora, MS 39071

	<u>Number</u>		<u>Cost</u>		<u>Total</u>
All Sports Pass (1 person)	_____	X	\$75.00		\$_____

Football Reserved Parking- **WAITING LIST** Number \_\_\_\_\_

Reserved Basketball, Softball and Baseball Chairback Seat-**WAITING LIST** Number \_\_\_\_\_

Please indicate how you would like to receive your passes:

\_\_\_\_\_ Pick up at Meet the Rebels on August 15th

\_\_\_\_\_ Pick up at school office

\_\_\_\_\_ By mail

If you have any questions, please contact:

Kim Webb 601-826-0006 or Gina Bozeman 601-214-9000