



GRAFTON ATHLETIC BOOSTER CLUB
GRAFTON HIGH SCHOOL AND GRAFTON MIDDLE SCHOOL
MEMBERSHIP YEAR 2018/2019

Date: _____

Please sign up **ALL** of your **GHS/GMS athletes**. Any athletes who are **NOT** paid up Booster Club members **WILL NOT** receive a t-shirt at their sports banquet. One t-shirt per athlete per year.

PARENT NAME:	PARENT EMAIL: (PLEASE PRINT CLEARLY)

HOME PHONE # _____ CELL PHONE # _____

ATHLETE NAME	SPORT	GRADE	JV/VARSITY	ADULT T-SHIRT SIZE S/M/L/XL/2XL/3XL

PAYMENT SECTION:

	No. of Members		TOTAL
Parent		x \$10	\$
Athlete		x \$10	\$
Donation			\$
		TOTAL	\$

GABC Only		TOTAL
	Cash Amount	\$
Check No. Please make checks payable to GABC.	Check Amount	\$
	Credit Card Amount	\$
	TOTAL	\$

Complete this form and have your student athlete bring it to the front office in an envelope marked GABC. If you prefer to send the membership form and payment, please send to the address below:

GRAFTON ATHLETIC BOOSTER CLUB, 403 GRAFTON DRIVE, GRAFTON, VA 23692