



2023 -2024 Akins Baseball Booster Club Membership

Player's Name: _____ Grade Level: _____

Parent/Guardian/Family Member Name Adding Membership: _____

Parent/Guardian/Family Member Name Adding Membership: _____

Mailing Address: _____

Phone #: _____ Email: _____

MEMBERSHIP LEVELS

Individual Membership Fee (\$20 per person) \$ _____
Includes 1 vote (must be 18 yrs old to vote)

Family Membership Fee (\$30) \$ _____
Includes 2 votes (must be 18 yrs old to vote)

DATE: _____ **PAYMENT METHOD:** _____ **TOTAL PAID \$** _____

Family/Guardian support is crucial to make this a successful year for Akins Baseball. The Program will require participation from its members for various activities. Please select the following areas in which you would be interested in volunteering your time and talents:

- | | |
|------------------------------------|-------------------------|
| _____ Field Maintenance | _____ Blue & Gold Night |
| _____ Concessions | _____ Banquet |
| _____ Fundraisers/Sponsorships | _____ Communications |
| _____ Senior Night Activities | _____ Game Announcer |
| _____ Other (please specify) _____ | |

Your membership and contributions help purchase necessary equipment and supplies for the teams and provides scholarships for qualified graduating athletes. At least one member of an athlete's family must be a booster club member to qualify for a scholarship.

Make checks payable to: Akins Baseball Booster Club
Pay Online in the BOOSTER STORE: www.akinsbaseballboosters.com