



**\*Please earmark what athlete the payment is for so we know who to credit.\***

## **PAYMENT INFORMATION FORM**

**PLAYER NAME:** \_\_\_\_\_

**Circle Team Your Player Made:**      6th                      7th                      8th

Enclosed \$ \_\_\_\_\_

Please Mail To:  
Josh Jones  
369 Windstone Blvd.  
Powell, TN 37849

**MAKE CHECKS FOR DEPOSIT PAYABLE TO: B.I.R.T.**

**Team Fee: \$395**

**\*\*Deposit, \$100 minimum, is due MAY 21<sup>st</sup>(can pay full amount at this time)\*\***

**\*\*Remaining balance is due, in full on JUNE 4<sup>th</sup> \*\***

**PLEASE SEND THIS FORM IN ANYTIME YOU MAKE A PAYMENT**