



2012 Red Sox Fantasy Camp Registration Form



The 2012 Official Red Sox Fantasy Camp will take place **February 5th – 12th** in Fort Myers, FL. Please fill out the form below to reserve your spot. The Red Sox require a \$800 deposit to hold your spot and full payment is due by October 31st, 2011. **Please fax your completed form to (617) 226-6348 or mail to Red Sox Fantasy Camp, 82 Brookline Avenue, Boston, MA 02215. You may also contact a Red Sox Fantasy Camp representative at (617) 226 -6400 to reserve your spot over the phone, or visit our website at www.redsox.com/fantasycamp to book online at any time.**

Returning campers who register with an \$800 non-refundable deposit before April 15th will receive an additional \$100 off of the public price.

- New Camper Price: **\$4,595** per person (based on shared room)*
- Veteran Camper Price: **\$4,395** (with early game and all uniform materials)
- No Uniform Discount: **(\$300)**
- No Early Game Discount: **(\$200)**
- Veteran Camper Early Signup Discount (before April 15th): **(\$100)**

- Single rooms are available for an additional \$600. Check here to request a single room

Personal Information:

First Name: _____ Last Name: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Telephone: (Day) _____ (Evening) _____

E-mail Address: _____

Date of Birth: ____/____/____ Occupation: _____

Height: _____ Weight: _____ Waist: _____ Pant Length: _____

Jersey Size (Suit Size):

M (40) L (44) XL (48) 2XL (52) 3XL (56)

Jersey Number: _____

Name on Jersey: _____

Warmup Size

M (40) L (44) XL (48) 2XL (52)

Hat Size: _____ (6, 6 1/2, 7, 7 3/4, etc)

Positions (select 2): _____

Payment Information

Check here to use the card already on file with the Boston Red Sox
or

I authorize the Boston Red Sox to charge my credit card listed below for the purpose and amount described above. I agree to pay this charge according to the terms of my cardholder agreement.

Credit Card: AMEX _____ VISA/MC _____ DISC _____

Card # _____ Exp _____

Signature of Authorized User _____ Date _____

Please print full name: _____