



# 2016 Kickball Program TEAM REGISTRATION FORM

## TEAM INFORMATION

TEAM NAME \_\_\_\_\_

CAPTAIN/COACH NAME \_\_\_\_\_

PHONE # \_\_\_\_\_ E-MAIL: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

## REQUESTS\* (Requests are granted at the discretion of the league administrator)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*Scheduling requests must be received before the registration deadline and an effort will be made to meet all requests whenever possible. Any requests submitted after the deadline may not be considered.

## PAYMENT INFORMATION

Payment Amount: \$ \_\_\_\_\_  League Fee (\$230)  Late Fee (\$25 after 7/19)

Payment Type:  Cash  Check  Credit Card

Credit Card #: \_\_\_\_\_ Exp: \_\_\_\_\_ Verification Code (3 digit): \_\_\_\_\_

Signature \_\_\_\_\_

Sponsor \_\_\_\_\_ Address \_\_\_\_\_

**Don't forget to submit your team roster and Player Contracts by the deadline.**