

THE URBAN INSPIRATIONAL KICKBALL LEAGUE

4273 Branch Ave Suite 217 Temple Hills, Md. 20748

Antwane Champion-Bey Founder / President (301) 316-2770 Travis Butler Vice President (240) 476-7313

2010 U.I.K.L. Player Registration Form

Price: \$60.00 per person That's **(3)** easy payments of \$20.00 per month starting in January 2010

Registration Location Coming Soon! You can also mail all payment to the above address.

T-Shirt Size (Circle One) S M L XL XXL XXXL 4XL 5XL

Health Insurance (Circle One) Yes / No

Name: _____ Home Phone: _____

Street Address: _____ Cell Phone: _____

City/Zip: _____ Date of Birth: _____ Age as of April 1st 2010

Email Address: _____

Previous Kickball Experience: Previous Player? (Circle One) Yes / No

Please list year(s) played and team of the last year team you played with: _____

Medical Conditions Please list **ALL** conditions / problems: _____

CONSENT: No application will be considered valid by The Urban Inspirational Kickball League Association unless each item below has been initialed and application has been signed and dated by the player.

____ In consideration of acceptance of this application, I, the undersigned, assume full and complete responsibility for any injury or any accident that may occur during my participation in the 2010 U.I.K.L. season.

____ I hereby release and hold harmless U.I.K.L., its Board of Directors, its agents, Board volunteers, and other members associated with the U.I.K.L. I hereby waive any and all claims against the U.I.K.L., its Board of Directors, its Agents, Board volunteers, and other members associated with the U.I.K.L., for personal injury or property damage which I may have or may hereafter accrue as a result of my participation in any event associated with the U.I.K.L. and the 2010 season.

____ I understand that my registration fee is not refundable

By my signature, I certify that the information provided above is true and correct to the best of my knowledge.

Sign Here: _____ Date: _____

Reminders:

* A player is not committed to your team until the U.I.K.L. receives his or her completed registration form with full payment

Payment Information: Cash _____ or Money Order _____ Only! Make Payable to **U.I.K.L.**

Received By: _____ Date: _____
