MILWAUKEE COUNTY PARKS – ORGANIZED SPORTS - 9480 WATERTOWN PLANK ROAD, WAUWATOSA, WI 53226
PHONE (414) 257-8030 - FAX (414) 257-8044 - www.countyparks.com

2016 FALL KICKBALL APPLICATION

Milwaukee County Parks Fall Sports leagues serves men and women, 18 years or older, with a variety of leagues that run from August to October. To be considered for acceptance into any sports league, each manager must submit all required forms and fees during the registration period indicated below. Preferences will be given on a first-come, first-served basis until each league is filled. However, submission of an application and payment does not guarantee either preference or participation.

EARLYBIRD LEAGUE ENTRY FEES: July 1 thru July 29, 2016

Any league	$175.00 (Includes team fee & 11 players)
Individual Player Fee	$15.00/player (Teams responsible for payment up to 15 players)

LATE LEAGUE ENTRY FEES: August 1 thru August 12, 2016

Any league	$225.00 (Includes team fee & 11 players)
Individual Player Fee	$20.00/player (Teams responsible for payment up to 15 players)

No applications will be considered for acceptance after August 12, 2016.

Please fill in the following w/your information by clicking on the lines below:

Team Name: _____ **Manager's Name:** _____

Cell Phone: _____ **Address:** _____

City: _____ **Zip:** _____ **E-Mail:** _____

Participant (s) agrees to indemnify, defend and hold harmless, the County, its officers and employees, from and against all loss or expense including costs and reasonable attorney's fees and/or liability for damages for personal injury and property damage to the extent caused by any negligent or willful act or omission of participant (s).

I hereby acknowledge that I have read, understand and agree to follow the terms and conditions, rules, regulations and considerations contained herein. In addition, I acknowledge and understand that I am responsible for any damage that may result from my actions or those of my guests or invitees.

I AGREE THAT THE ENTRY OF MY FULL NAME BELOW CONSTITUTES AN ELECTRONIC SIGNATURE.

Signature: _____ Date: _____

DATE PAID_____
AMOUNT_____
LEAGUE_____

Payment Type: CREDIT ☐ CHECK ☐ CASH ☐

Credit Card Information: **(Visa, MasterCard, Discover, AMEX)**

Cardholder: _____

Card #: _____ Expiration: _____

Please check the box that applies to the league you wish to enter.

Fall Classic Leagues **(7 games)**

8 TEAM MAX EACH LEAGUE- PLAYS ONCE A WEEK

COED SOCIAL
West Milwaukee #2
☐ TUESDAY ☐ THURSDAY