

# ALBURTIS AREA COMMUNITY CENTER KICKBALL SIGN-UP FORM

**This is a FUN co-ed activity. Heckling the Coaches or poor sportsmanship will NOT be tolerated at any time, you will be asked to leave the game.**

**\*\*\*Sneakers are to be worn, NO sandals, crocks or flip flops.**

**If your child is wearing inappropriate footwear, they will not be able to participate**

**\*\*Participation Agreement must be signed to participate\*\***

**SIBLINGS WILL BE PLACED ON THE SAME TEAM. OTHER REQUESTS CAN BE SUBMITTED BUT MAY NOT BE HONORED.**

REQUEST: \_\_\_\_\_

Shirt Sizes available are **Child:** S M L **Adult:** S M L XL

Player's Name SIZE	M/F	AGE	DOB	INDICATE SHIRT
				<b>Child/Adult Circle</b>
_____	_____	_____	___/___/___	Child/Adult: S M L XL
_____	_____	_____	___/___/___	Child/Adult: S M L XL
_____	_____	_____	___/___/___	Child/Adult: S M L XL
_____	_____	_____	___/___/___	Child/Adult: S M L XL

Parent/Guardian Name (s): PLEASE PRINT \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Street Address

CELL: \_\_\_\_\_ HOME: \_\_\_\_\_

**EMAIL ADDRESS: (PRINT VERY CLEARLY)** \_\_\_\_\_

**\*\*WE PRIMARILY COMMUNICATE BY EMAIL\*\***

Each family is asked to help by volunteering for one or more of the following. This program cannot happen without the help of parents. PLEASE BE AWARE THAT ALL COACHES WILL BE SELECTED ON A FIRST COME FIRST SERVE BASES ONLY. ALSO WE CANNOT RUN TEAM WITHOUT COACHES. We will try our best to accommodate your selections below, but there is a chance you will be asked to assist in other areas due to lack of participation in other needed volunteer positions once the TEAMS are organized. **There is a \$10 non-participation snack fee if you choose not to donate snacks.** Thank you for your understanding in advance 😊!

**\*\*\*Shirt size needed if you are a coach:** \_\_\_\_\_

**Co-Coach:** 4 to 6  7 to 13  *(2 per Team needed, shirt size needed)*

**Team Snack Coordinator:** 4 to 6  7 to 13

*(All parent(s) take turns bringing snacks each game for the team)*

Number of Players \_\_\_\_\_ x \$35 \_\_\_\_\_

Non-Participation Snack donation Fee \_\_\_\_\_ \$10 \_\_\_\_\_

**PLEASE MAKE YOUR CHECK PAYABLE TO THE AACC** = \_\_\_\_\_

**Mail your payments to :  
Mara Mackiewicz 5153 Celia Drive Allentown PA 18106**

