

PHOENIXVILLE JAYCEES/PHOENIXVILLE RECREATION DEPARTMENT 2016 KICKBALL LEAGUE ROSTER

TEAM NAME: _____

LEAGUE: ___Kickball___

TEAM CAPTAIN: _____

NAME ADDRESS CITY/STATE/ZIP PHONE EMAIL

ASS'T CAPTAIN: _____

NAME ADDRESS CITY/STATE/ZIP PHONE EMAIL

NAME GENDER EMAIL TSHIRT SIZE (S, M, L, XL, XXL)

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****A roster consists of a minimum of 10 players (3 female) and a maximum of 20.**

Cost: \$500/team

A \$100 non-refundable deposit must be made at time of registration by April 11th to secure a spot for your team. Payment for the remaining \$400 is due by June 14th.

Please make checks payable to:

Phoenixville Jaycees
8 Gay Street
P.O. Box 416
Phoenixville, PA 19460