

# MUSA™ Kickball Team Registration Form

Spring 2010 (May 2<sup>nd</sup> through July 17<sup>th</sup>)

Season begins the week of May 2<sup>nd</sup>; Registration deadline is April 7<sup>th</sup>

## Division (please check your desired division):

- Sunday, Minneapolis NSP Fields, Fields 2 and 3 (12 team openings)
- Monday, Bloomington Dred Scott, Field 4 (6 team openings)
- Monday, St. Paul Rice & Arlington, Fields 1 and 3 (12 team openings)
- Tuesday, St. Paul Rice & Arlington, Field 1 (6 team openings)
- Wednesday, St. Paul McMurray Fields, Field 3 and 4 (12 openings)
- Thursday, St. Paul McMurray Fields, Field 3 and 4 (12 team openings)
- Friday, Minneapolis Sibley Park, Field 3 & 5 (12 team openings)
- Friday, Bloomington Valley View Playfields, Field 3, (6 team openings)

Team Name: \_\_\_\_\_ Captain: \_\_\_\_\_

### Payment calculation (All prices include the team t-shirts, equipment, shipping and handling, and field rental fees for the season.):

#### Base Cost:

\$450 per team covering up to 15 players including short sleeve t-shirts (standard logo and 1 ink color)	= _____
\$30 per additional player over 15 for short sleeve t-shirts	Qty. _____ X \$30 = _____
\$500 per team covering up to 15 players including long sleeve, ringer or jersey t-shirts	= _____
\$30 per additional player over 15 for long sleeve, ringer, and jersey t-shirts	Qty. _____ X \$30 = _____
\$325 per team for a team registering with team shirts returning from a previous season	= _____

#### Additional Costs:

\$20 per team t-shirt set-up cost for custom logo	= _____
\$20 per team t-shirt set-up cost for custom logo on file from a previous season	= _____
\$25 per player for additional shirts from a previous season (min. 6 to order)	Qty. _____ X \$25 = _____
<b>Total Payment Due</b>	<b>= _____</b>

Credit Card Information (Circle one):      **Visa**                      **Master Card**

Number: \_\_\_\_\_ Exp.: \_\_\_\_\_

Checks should be made out to:              **Midwestern Unconventional Sports (MUSA)**  
Mail to:    **MUSA LLC/Jennifer Acker**  
   **19457 Ellington Trail**  
   **Farmington, MN 55024**

If paying by credit card, you may fax your completed registration form to 651.463.3317.

Team Name: \_\_\_\_\_ Captain: \_\_\_\_\_

**Shirt Type:**

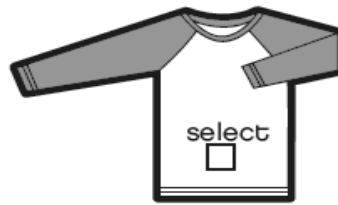
please check the appropriate box



Basic T



Ringer T



3/4 Raglan



Longsleeve Plain

**Shirt Color (Choose from below and fill in here):**

**Short Sleeve T-Shirt:**  
**(S-3XL)**

Ash  
Dark Chocolate  
Military Green  
Maroon  
Sky  
Royal Blue  
Black  
Gold  
Irish Green  
Violet

Safety Green  
Daisy Yellow  
Navy Blue  
Light Blue  
Cherry Red  
Sand  
White  
Light Pink  
Orchid  
Lime  
Tangerine

**Ringer T-Shirt: (S-2XL)**

Carolina Blue/Navy  
Gold/Navy  
Irish Green/Navy

**Jersey T-Shirt: (S-2XL)**

Heather Grey/Black  
Heather Grey/Navy  
Heather Grey/Scarlet  
White/Black  
White/Scarlet  
White/Navy

**Long Sleeve T-Shirt:**  
**(Med.-2XL)**

Ash  
Navy Blue  
Black  
White  
Forest Green  
Red  
Royal Blue  
Sport Grey

**Choose a team logo (check one):**



\_\_\_\_\_ We will be submitting our personalized logo in hard copy, JPG, GIF, or BMP form for the front of our shirts (\$20 per team set-up cost); please email the team logo to [jen@kickoplex.com](mailto:jen@kickoplex.com)

\_\_\_\_\_ We would like to use a logo from a past season (please indicate logo file name); \$20 set-up fee also applies to past logos on file per team additional cost.

\*\*All team logos will be printed in either black or white depending on the shirt color.

**Shirt Sizes:**

**Quantity**

**Two-Digit Numbers on back (no symbols or letters)**

S \_\_\_\_\_

M \_\_\_\_\_

L \_\_\_\_\_

XL \_\_\_\_\_

XXL \_\_\_\_\_

## Shipping and Other Team Information:

If your team is ordering shirts, please provide the shipping address to where they should be shipped; if your team is not ordering shirts, please provide the captain and co-captain's email address in the space provided. Any teams paying by credit card will need to supply the card holder's address below as well. Email addresses are used to supply each team with league information during the season such as schedule changes or early game cancellations during the day.

Team Name: \_\_\_\_\_ Captain: \_\_\_\_\_

Captain/Shipping Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Captain Email Address (required): \_\_\_\_\_  
(Email is the primary communication method so an address is required)

Co-Captain Name (required): \_\_\_\_\_

Co-Captain Email Address (required): \_\_\_\_\_  
(Email is the primary communication method so an address is required)

All team shirts will be shipped out the week of April 26, 2010 regardless of team registration date; league start is the week of May 2, 2010.

Schedules will be emailed to all team captains and co-captains following the registration deadline or following the full registration of an event night. Team schedules will also be posted on [www.musakickball.com](http://www.musakickball.com) under the Twin Cities section of the website following the email notification of team captains and co-captains.

All teams must submit the completed registration form, and full payment to be considered a complete registration (meaning all three completed registration pages). The team liability waiver will be collected from each team on the first day of scheduled play. **Space will not be saved or held for teams that do not submit completed registration with full payment.** Team registration is on a first-come, first-served basis for any registration evening.

To receive a copy of the official rules contact Jen Acker at [Jen@kickoplex.com](mailto:Jen@kickoplex.com). Check out our website at [www.musakickball.com](http://www.musakickball.com).

## Kickball Waiver – Spring 2010

By signing this document, I agree to take full responsibility for myself and my actions as a participant in the MUSA Spring 2010 kickball league and hold MUSA, LLC. free of liability from any accident, injury or loss that may occur due to my participation. I understand the risks of injury that are present in playing kickball and accept these risks.

Team Name: \_\_\_\_\_

Captain: \_\_\_\_\_ Captain's Phone Number: \_\_\_\_\_

<b>Player:</b>	<b>Print Name</b>	<b>Signature</b>	<b>Date</b>
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

11. \_\_\_\_\_

12. \_\_\_\_\_

13. \_\_\_\_\_

14. \_\_\_\_\_

15. \_\_\_\_\_

16. \_\_\_\_\_

17. \_\_\_\_\_

18. \_\_\_\_\_

19. \_\_\_\_\_

20. \_\_\_\_\_