



4th Annual Midwestern Chapter Kick Ball Tournament

Thursday, February 2, 2017

Join us for Networking, Food, Drinks, and Fun!
McCormick Place

Registration and warm up begin at 4:30 PM
Games Begin at 5:30 PM

Kick Ball Teams: All teams must have a minimum of six players with at least two female players on the field during play. Eight players are included in the registration fee.

\$350 Member Team / \$375 Non-Member Team

Individual Players: Individual players are required to pre-register and team assignments will be made on-site

\$45 per person

Not a Kick Ball player? Join us anyway and be a benchwarmer! Root for your favorite team as you enjoy plenty of food and drinks and of course, networking.

\$45 per person

Pick your team soon! The deadline to register is January 26, 2017. Team space is limited. Please pre-register.



IAEE MWC KICKBALL TOURNAMENT 2017 REGISTRATION

*Each Team Captain, Individual or Non-Player must fill out the information below.
All players must sign the attached waiver. Teams are required to complete the attached Team Roster.*

Name and Title

Company

Address

City, State, Zip

Phone # (_____) _____ Fax # (_____) _____

E-Mail _____

- ____ Team Registration @ \$350 member (please complete attached roster)
____ Team Registration @ \$375 non-member (please complete attached roster)
____ Additional Players over eight @ \$45 each
____ Individual Player @ \$45 each
____ "Benchwarmer" Participant @ \$45 each



Total \$ _____

☐ Check Enclosed ☐ AMEX ☐ MC ☐ VISA

Card Number

Exp. Date

Name as it appears on card

Signature of card holder

Payment: Make check payable to: IAEE Midwestern Chapter. Payment must accompany your registration form.

Mail or fax to:

**IAEE Midwestern Chapter
Attention: Elizabeth Haley
1717 North Naper Blvd, Suite 102
Naperville, IL 60563
Phone: 630-416-1166**

Registration cancellations received in writing three business days or more prior to the event will receive a full refund. No shows or cancellations less than three business days prior to the event will be invoiced/charged the full, applicable fee.

Questions? Contact Gail Brooks at 630-416-1166
or e-mail gbrooks@wmrhq.com.

KICKBALL 2017 TEAM ROSTER

Team Name: _____

Team Captain: _____

- *NOTE: all teams must have a minimum of 6 players and are required to have 2 female players in the "field" at all times during play.*

NAME	COMPANY
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1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

ADDITIONAL PLAYERS OVER EIGHT (8) ARE REQUIRED TO PAY A \$45 PLAYER FEE

9. _____

10. _____

Email or Fax by January 26, 2017

Email: ehaley@wmrhq.com

Fax: 630-596-1414

Attn: Elizabeth Haley

METROPOLITAN PIER AND EXPOSITION AUTHORITY

WAIVER AND RELEASE

The undersigned, for and in consideration of permission to use the McCormick Place, Hall F1, furnished by the Metropolitan Pier and Exposition Authority (Authority), the receipt of which is hereby acknowledged, do hereby assume full responsibility for any accident which may happen and for any damage or injury to my person or property, or the Authority's property and hereby release and discharge the Authority as well as IAEE and Williams Management Resources and waive any and all claims, demands, actions and causes of actions for injury to person or damage to property by reason of any act or omission from any cause whatsoever as the result of negligence, gross negligence or willful and wanton misconduct.

Date: _____

Team Name: _____

Team Captain: _____

1.	_____	_____
	NAME	SIGNATURE
2.	_____	_____
	NAME	SIGNATURE
3.	_____	_____
	NAME	SIGNATURE
4.	_____	_____
	NAME	SIGNATURE
5.	_____	_____
	NAME	SIGNATURE
6.	_____	_____
	NAME	SIGNATURE
7.	_____	_____
	NAME	SIGNATURE
8.	_____	_____
	NAME	SIGNATURE
9.	_____	_____
	NAME	SIGNATURE
10.	_____	_____
	NAME	SIGNATURE

Email (ehaley@wmrhq.com) or Fax to 630-596-1414, Attn: Elizabeth Haley by January 26, 2017 or bring COMPLETED form to the event.

Team will be unable to participate without completed waiver.