

HAMPSHIRE TOWNSHIP PARK DISTRICT

Friend Request Form

390 South Avenue • PO Box 953, Hampshire, IL 60140 • Fax: 847-683-1741

Sport: (circle one)

Soccer

Basketball

T-Ball

Flag Football

Volleyball

Other _____

Family 1 (Participant Name)

Family 2 (Participant Name)

First

Last

First

Last

X

X

Parent signature

Date

Parent signature

Date

E-mail:

E-mail:

*Please get this Friend Request Form to the Athletic Supervisor by the registration deadline date for the circled activity above. Once the form is properly filled out, both families will receive a confirmation email. You may return this form in an envelope labeled ATTN: Athletic Supervisor.

Note:

Family 1 must request Family 2 and vice versa. Brothers, Sisters, and Cousins(same last name) do not need to fill out this form. They will automatically be placed on the same team. This form must be signed by both families in order for the friend request to be guaranteed. Please note that there is no guarantee that you will get the coach you requested **AND** friend request.