



Benefiting:



Sponsored By:



Player Name _____
Team/Year _____

Event Date/Time: January 31, 2010; 3:00 PM - 6:00 PM

Location: Sole Roll Indoor Soccer Center; 4435 McEwen Rd, Dallas 75244

Goal: I am raising money and awareness for The Center for Cancer and Blood Disorders at Children's Medical Center in honor of Christian Graef, ASG 98B, and all children battling cancer by accepting pledges for the amount of times I successfully juggle a soccer ball. 100% of the net proceeds will be donated.

JUGGLES

Attempt #1 _____
Attempt #2 _____
Attempt #3 _____

Highest Number of Juggles: _____

PLEDGES

Sponsor Name _____ Phone # _____
 Address _____
 Donation Per Juggle: \$ _____ or Flat Amount: \$ _____ Donated
 Sponsor Signature _____
 Please make checks payable to: First Kick Foundation

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 Address _____
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First Kick Foundation is a 501(c)3 non-profit organization. All gifts are tax-deductible to the extent permissible by law.

www.asgfc.com



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