APPLE VALLEY PARKS AND RECREATION DEPARTMENT

2017 WINTER VOLLEYBALL LEAGUE - REGISTRATION FORM

TEAM NAME_____

MANAGER_____ADDRESS_____

CITY_____ ZIP_____

MANAGER'S PHONE NUMBERS (Home) _____ (W/C)_____

E-MAIL ADDRESS_____

(An e-mail address is REQUIRED; all league info will be sent by e-mail rather than mail.)

ASSISTANT MANAGER _____

ASSISTANT MANAGER'S PHONE #'s (H)_____ (W/C)_____

LEAGUE IN WHICH YOU ARE REGISTERING YOUR TEAM:

(Please list a 2nd preference).

Tuesday Women's Power "A" ____	**Thursday Women's Rec. "A1"** ____	**Friday Co-Rec. "A1"** ____
Tuesday Women's Power "B/C" ____	**Thursday Women's Rec. "A2"** ____	**Friday Co-Rec. "A2"** ____
(Women's Officiated leagues fees are $195/resident fee & $210.00 Non-Res.)	**Thursday Women's Rec. "A3"** ____	**Friday Co-Rec. "B1"** ____
	Thursday Women's Rec. "B1" ____	**Friday Co-Rec. "B2"** ____
	Thursday Women's Rec. "B2" ____	**Friday Co-Rec. "C1"** ____
	Thursday Women's Rec. "C" ____	**Friday Co-Rec. "C2"** ____
	(Thur. and Fri league fees are $100/resident fee & $125 Non-Res.)	**Friday Co-Rec. "D"** ____

PRIOR LEAGUE(S) THAT YOUR TEAM HAS REGISTERED FOR IN THE APPLE VALLEY LEAGUES:
(Please list team name, manager's name, and season; i.e.: fall, winter, or summer, and the year):

TEAM NAME MANAGER'S NAME LEAGUE SEASON YEAR

1. _____

2. _____

**NOTE all teams MUST submit a NEW ROSTER this season!!!