

Four Lakes Recreation Volleyball League Team Sign Up Form - **4 Person Team: 3 males/1 female minimum**

TEAM NAME:

LEAGUE: 4B1 Mon/Th

Captain Name		Captain CELL Phone Number	
		Captain Email	
Co-Captain Name		Co-Captain Cell Number	
		Co-Captain Email	

Resident Fee:	\$20.00	Non-Resident Fee:	\$100.00
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	Name	Initial	Cell Phone	Email	Four Lakes Resident Yes or No (Office will confirm)		Shirt Size (Adult) Circle One		
1					YES	NO	S M L XL	MALE	FEMALE
2					YES	NO	S M L XL	MALE	FEMALE
3					YES	NO	S M L XL	MALE	FEMALE
4					YES	NO	S M L XL	MALE	FEMALE
5					YES	NO	S M L XL	MALE	FEMALE
6					YES	NO	S M L XL	MALE	FEMALE
7					YES	NO	S M L XL	MALE	FEMALE
8					YES	NO	S M L XL	MALE	FEMALE

Office Use:	Team Number	Total Due			Team Fee	Team Fee Paid	Date
	SO:	\$			\$60.00		