Winter Volleyball League Players' Fees

TEAM NAME	
NIGHT YOU PLAY	GYM LOCATION
MANAGER'S NAME	
ADDRESS CHANGE (if any)	
PHONE NUMBER CHANGE (if any	y)
CHANGES TO ROSTI	ER (TWO ARE ALLOWED-new players must sign roster)
Who is to be taken off roster? (Full name)
·	dded to roster? (Full name and phone number)
Anything you want me to know	regarding league placement?
	AYERS' FEES: Due on or before Nov. 24
\$45/player (if paid by N	lov. 24) x(number of players) =

FORM SUBMISSION

- Option 1 Bring the completed form to the BPRD office, 400 E. Front Ave., with payment (cash, check or credit card). Office hours are Monday-Friday from 7:30am-5pm.
- Option 2 Email the completed form to volleyball@bisparks.org. Within 2 business days, you will receive an email with a link to payment options for your players' fees.

PLEASE NOTE:

This form is ONLY for teams who signed up for the Winter league during registration in August (paid \$150 sponsor fee).

