

Burlington Regional RecPlex
501 S. Broadway St., Burlington, IA 52601
319-758-9419
www.teamsideline.com/burlington

2025 RECPLEX VOLLEYBALL REGISTRATION FORM

The following information needs to be completed and submitted at the time Team Fees are due. Please note appropriate deadlines below.

Team Name/Sponsor: _____

Team Captain: _____

Home or Cell Phone: _____

Email: _____

Season I (Spring/Summer)

Thursday Co-ed 6v6 League: _____

Sponsor/Team Fee: \$200 – Deadline, April 21

Tuesday Co-ed 6v6 League: _____

Sponsor/Team Fee: \$200 – Deadline, May 23

Season II (Summer/Fall)

Thursday Co-ed 6v6 League: _____

(Sponsor/Team Fee: \$200 – Deadline, July 14)

Multiple League Discounts! \$360 for 2 leagues

For office use only:

Date Received _____ Staff Initials _____

Fees Collected _____ Check # or Cash _____