

## City of Beloit Parks & Leisure Services Division Indoor Adult Volleyball League Team Registration Form/Roster

Please mark one of the following leagues offered:

MONDAY	TUESDAY	WEDNESDAY	WED @ FRUZEN	THURSDAY
Coed A	Coed A	Women's A	Men's A	Coed A
Coed B	Coed B	Women's B	Men's B	Coed B
Coed C	Coed C	Women's C	Men's C	Coed C
Coed D	Coed D	Women's D	Men's D	Coed D
* Note: The guidelines:	e City of Beloit,	Leisure Services de	fines competitiveness	s by the following
B Leag C Leag	<b>jue Teams</b> - Com <b>jue Teams</b> - Fun,	petitive, 3 hits, have p strive for 3 hits, differ	veral nights a week all y layed together in organi ent levels of ability cipated any organized p	zed play
TEAM NAME				
MANAGER'S	NAME			
ADDRESS _	STREET	CITY	STATE	ZIP
	SINELI		SIAIL	ZII
PHONE			GEODINA NY	
PRI	MARY X the squa	re above for "Text" Updates	SECONDARY	
E-MAIL ADD	RESS			
LACT VEAD/	TEAM NAME		DE	CORD
LASI YEAR'S	S TEAM NAME _		KE	CORD
			nsferable, regardless of the ci team drop out for any reaso	
Team Manac	ger's Signature			Date
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## BELOIT LEISURE SERVICES ADULT SPORT LEAGUE ROSTER FORM

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