Muchenberger Center
Adult Volleyball Leagues
Team Registration Form

League Fee: **$180.00 per team (INCLUDES REFEREE FEES)**
Registration Dates: **October 24 – November 30, 2011**
Season Dates: **The weeks of December 5, 2011 – February 13, 2012**
(Each captain will receive one copy of the schedule. All schedules and other league information will be made available on the Muchenberger Center website at www.ci.st-joseph.mo.us/parks/much.cfm)

The league runs 10 weeks. Registration is on a first come, first serve basis only.
No registration without fees paid in full and no late entries will be accepted.

Please complete the form below

Team Name _____

(Circle one) **Women's Intermediate** (Monday) **Co-ed Intermediate** (Tuesday)

Co-ed Power (Friday) **Women's Power** (Wednesday)

Captain's Name _____

Address _____

City _____ **State**_____ **Zip Code** _____

Day Phone ( )_____ **Evening Phone ( )**_____

Email Address _____
(It is the captain's responsibility to keep a current phone number and address on file with our department in order to be notified of any changes pertaining your team.) (**ALL PERSONAL INFORMATION IS FOR ADMINSTRATION PURPOSES ONLY.)**

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PAYMENT OPTIONS: please check one
☐ Cash ☐ Check ☐ Credit Card

Please make checks payable to: **The City of St.Joseph**
If fees are paid by check only one check per team will be accepted. NO EXCEPTIONS! We will no longer be accepting checks from each player for their portion.

Required information for all checks: (cannot accept without this information.)

DRIVER'S LICENSE # & EXPIRATION DATE: _____
PLACE OF EMPLOYMENT: _____

CREDIT CARD PAYMENT: **You must complete the following information, only if you don not have card present at time of registration.**

Credit Card: ☐ Master Card ☐ VISA ☐ Discover

Print Cardholders Name _____

Card Number _____

3 Digit Authorization Code _____ Expiration Date _____

I authorize the City of St.Joseph to charge $_____ to the listed above credit card account.

_____ _____
Cardholder's Signature Date

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A completed roster must be turned in to Muchenberger Center at time of registration with fees.

Team Roster

This is an adult league. ALL players must be at least 18 years-old to be eligible to play in the league. There will not be any exceptions.

Any players wanting to receive emails regarding schedules, game cancelations, and league information please list their email address.

PLEASE PRINT

Team Name:_____

Circle One: **Women's Intermediate** (Monday) **Co-ed Intermediate** (Tuesday)

Co-ed Power (Friday) **Women's Power** (Wednesday)

Players' Roster:

(Must be completed with everyone's name, phone number and email address at time of registration.)

All team members and substitutes' names must be on the roster; NO names will be allowed to be added once league play has begun.

PLEASE PRINT –if email address can not be read, you will not be added to the list to receive schedules or other notifications.

NAME	PHONE NUMBER	EMAIL ADDRESS

**** Forms and fees must be turned in to Muchenberger Center. For your convenience the forms can be faxed or emailed. Call for fax number or email address 271-5512****