

Beach Volleyball
Application Agreement
PLEASE FILL OUT COMPLETELY

We, the undersigned, representing the _____ team, hereby
 (team name)
 make an application for entry in the following league(s):

Circle One: Beginner League 6's Tuesday Thursday
 Intermediate League 6's Monday Tuesday Wednesday
 Advanced League 6's Thursday

Fee: **\$335** **Returning teams**
 \$365 **New teams**

If accepted into the league, we agree to abide by the rules and regulations as drawn up by the Stamford Recreation Services Division. Signed: Team Manager: _____

PRINT INFORMATION CLEARLY

Team _____ League Last Year _____ This Year _____

(Contact Person) _____

Address _____, City _____, State ____ Zip _____
 (If Industrial Team, Company Address)

Telephone- Home _____ Work _____ Ext. _____

Cell _____ Email: _____

Second Contact Person _____

Telephone-Work _____ Cell _____ Email _____

FOR OFFICE USE ONLY:

Amount Paid: \$ _____ Date Received: _____

Cash: _____ Check #: _____ Mastercard: _____ Visa: _____

