

WA-WM RECREATION DEPARTMENT COED HIGH SCHOOL SAND VOLLEYBALL

9th, 10th, 11th & 12th Grade League

WHEN: Tuesdays
Starting June 15, 2010

COST: \$60.00 Team Fee

Make checks payable to: WA-WM Recreation Department
2930 So. Root River Parkway
West Allis, Wisconsin 53227
PHONE: 604-4900

ALL PARTICIPANTS MUST GO TO SCHOOL IN WA-WM ET AL. OR BE A RESIDENT OF WA-WM ET AL.

REGISTRATION DEADLINE: Tuesday – June 1 , 2010 5:00 PM

Limited to First 6 teams Registered!!!

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## ENTRY FORM - HIGH SCHOOL SAND VOLLEYBALL

TEAM NAME Will be assigned SCHOOL \_\_\_\_\_

COACH (Parent)/Team Representative \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE: HOME \_\_\_\_\_ WORK \_\_\_\_\_

**TEAM ROSTER - A copy of each participant's ID must be turned in with the registration form and fee. No player/team will be allowed to play without ALL copies of IDs on file with the registration!!!**

(PLEASE PRINT)

1. \_\_\_\_\_

7. \_\_\_\_\_

2. \_\_\_\_\_

8. \_\_\_\_\_

3. \_\_\_\_\_

9. \_\_\_\_\_

4. \_\_\_\_\_

10. \_\_\_\_\_

5. \_\_\_\_\_

11. \_\_\_\_\_

6. \_\_\_\_\_

12. \_\_\_\_\_

AMOUNT PAID \_\_\_\_\_

DATE \_\_\_\_\_

POS