

Volleyball Team Roster

Team Name		League/Site	
Manager		Address	
Phone H)	W)	Email:	

*Players signature acknowledges that he/she has read the League rules & agrees to abide by the same during the 2018 season.

Name (Print)	Address	Hm Phone	Wrk Phone	*Signature of Player
12				

*Please Note: 1. Roster limit is 12 players.

2. Players must be 16 years of age or older.

3. Rosters are frozen after the 3rd week of play.

4. Any questions, call (309) 434-2260.