

PARKS, RECREATION & CULTURAL ARTS

## **VOLLEYBALL TEAM REGISTRATION FORM**

Last Year's Team Name		
Manager's Name		
Manager's Address		
City Zi	ip Hm Phone	
Email	2nd Phone	
Please Designate League:		
Thursday Recreation		-
Tuesday Intermediate 🗖	Charge Info VISA, MasterCard, Discover	and American Express
Tuesday Advanced	Not necessary if paying by check or cash.	VISA MasterCard DISCOVER
	Credit Card Number	Expiration Date
Bloomington Parks, Recreation & Cultural Arts	Card Holder (print name)	Payment Amount
115 E Washington St. Suite 103 Bloomington, IL 61701 Phone: 309-434-2260 Fax: 309-434-2483	Authorized Signature	V-Code on back
Bloomington	VOLLEVRALL TEAM REGISTRA	TION FORM
PARKS, RECREATION & CULTURAL ARTS	VOLLEYBALL TEAM REGISTRA	ATION FORM
Parks, Recreation & Cultural Arts		
Parks, Recreation & Cultural Arts Team Name Last Year's Team Name		
Parks, Recreation & Cultural Arts Team Name Last Year's Team Name Manager's Name		
Parks, Recreation & Cultural Arts Team Name Last Year's Team Name		
PARKS, RECREATION & CULTURAL ARTS Team Name Last Year's Team Name Manager's Name Manager's Address	ip Hm Phone	
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PARKS, RECREATION & CULTURAL ARTS Team Name Last Year's Team Name Manager's Name City Zi Email	ip Hm Phone 2nd Phone	
PARKS, RECREATION & CULTURAL ARTS Team Name Last Year's Team Name Manager's Name Manager's Address CityZi Email Please Designate League:	ip Hm Phone 2nd Phone <b>Charge Info</b> VISA, MasterCard, Discover a	rmation - and American Express.
PARKS, RECREATION & CULTURAL ARTS     Team Name   Last Year's Team Name   Manager's Name   Manager's Address   City   Zitemail   Please Designate League:	ip Hm Phone 2nd Phone <b>Charge Info</b>	rmation - and American Express.