



RENFREW PARKS & RECREATION DEPARTMENT

VOLLEYBALL / Basketball LEAGUE 2007 / 2008 Season TEAM REGISTRATION FORM

Leagues play will commence the week after Thanksgiving & continue through to mid March 2008.
Games will be scheduled at 7:00, 8:00 and 9:00 pm. Game play is approximately 60 min.
Playoff s will take place in Late March & April.

LEAGUE REGISTRATION (Please identify which league you are registering)

- Ladies Recreational League – Wednesday Evenings at St. Joseph’s Ladies Competitive League – Wednesday Evenings at RCI
- Mixed Recreational League – Thursday Evenings at St. Joseph’s Mixed Competitive League – Thursday Evenings at RCI
- Ladies Basketball League – Tuesday Evenings at RCI

Team Name or Sponsor:		
Team Captain or Rep:	Home Phone:	Work Phone:
Commonly Checked Email:	Cell #:	Fax #:

As the Team Captain or Rep. It is your responsibility to:

- Ensure that the Team Registration form is complete and accurate before submission to the Rec. Department. Incomplete forms will not be accepted.
 - Ensure that full payment (**\$25.00 per player**) for all team members is submitted to the Rec. Dept. with the registration form.
 - Ensure all NEW and RETURNING players receive a copy of the League Schedule and League Rules of Play.
 - Ensure that changes and cancellations in the league schedule are passed down to all members of your team.
- As the Team Captain or Rep. I agree to abide by the terms and conditions outlined above.

Signature:

Date:

TEAM ROSTER

Please note that team rosters must be **COMPLETE** and firm by January 2008. A team may only add a player after this date in the event that the number of players on the team falls below 5 players. All **new players must be added to the team roster and pay the \$25.00 per player fee** to be covered under league insurance.

A team may not stack the team for the play off's, any attempt to do so will result in the team being cut from the Play Off's.

In the event that the Team Captain or Rep. Can not be reached, the department will contact the Team Rep. Alternate indicated below.

Team Rep. Alternate:	Home Phone:	Work Phone:
Commonly Checked Email:	Cell #:	Fax #:

	Player's Name	911 Address	Town/Township	Postal Code	Phone Number	Paid
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						

Please do not submit incomplete registration forms.

If you have more players, please add their information to the back of this page.