2016 FALL VOLLEYBALL LEAGUE

What: Adult Co-Ed Volleyball League

When: Games begin the week of Sept 5
Registration: July 25-Aug 19

Where: Columbus Armory

Day	Type	Code	Fee	# Teams
Monday	Recreational	545200-2A	$145	16
Thursday	Recreational	545200-2B	$145	16

The fine print:
- Leagues will be filled on a first-come/first served basis.
- Seven match season followed by a single elimination tournament.
- COMPLETED roster must be completed and turned in at the time of registration.
- Minimum of 6 players, maximum of 15 players on a roster.
- All fees must be paid at the time of registration. NO EXCEPTIONS!

Columbus Parks and Recreation Department
739 22nd St, Columbus, IN 47201
(812) 376-2680
www.columbusparksandrec.com

Volleyball Roster Form

Circle One: Monday Thursday

Team Name: _____

Manager's Name: _____

Manager's Address: _____

Manager's Phone: (H)_____ (C)_____

Manager's Email: _____

Name **Address** **Email** **Phone**

1._____

2._____

3._____

4._____

5._____

6._____

7._____

8._____

9._____

10._____

11._____

12._____

13._____

14._____

15._____

Minimum of 6 players and maximum of 15 players on your roster.
Monday: 545200-2A Thursday: 545200-2B

Register by: Mail in, call (812) 376-2680, in person at Donner Center, fax to (812) 378-2892 or email (see website).

Charge Card # _____ Exp. Date _____

CVV2 Code (3 digit code on back of card _____

Card issued to: _____

ROSTER MUST BE FILLED OUT COMPLETELY - Incomplete rosters will not be accepted.