

## Clintonville Parks & Recreation Division

30 S. Main St || (715) 823-7668 || mherter@clintonvillewi.gov || Office Hours: M-Thur 8:30 a.m.-4:30p.m.

## Volleyball League

Team Name:	Season:	
Team Captain Information	Team Co-Captain Information	
Name:	Name:	
E-mail:	E-mail:	
Phone:	Phone:	
Address:	Address:	
Street/Road	Street/Road	
City/Zineada	City/Zinanda	

City/Zipcode

City/Zipcode

٦

Player's Name	City of Clintonville Resident		
1.	Yes or No (circle one)		
2.	Yes or No (circle one)		
3.	Yes or No (circle one)		
4	Yes or No (circle one)		
5.	Yes or No (circle one)		
6.	Yes or No (circle one)		
7.	Yes or No (circle one)		
8.	Yes or No (circle one)		
9.	Yes or No (circle one)		
10.	Yes or No (circle one)		
11.	Yes or No (circle one)		
12.	Yes or No (circle one)		

The team fee must be paid prior to participation. Any roster changes must be made in advance by the captain or co-captain with the Parks & Recreation Coordinator approval. Captains will be notified when team fees are finalized.

## MAIL FORM AND PAYMENT AT:

**REGISTER IN PERSON AT:** 

Clintonville City Hall, 50 10<sup>th</sup> St., Clintonville, WI 54929

Clintonville DPW Office, 30 S. Main St., Clintonville, WI 54929

For Office Use Only:							
Received By:	Date:	<i>Check</i> #:	Total Fee Paid:	Coach:			
Winter: 100-46755-40 (4050)							