

COMPANY TEAM REGISTRATION FORM

Captains: Remember to keep a copy of this completed roster for your records!

- Teams have until match 6 to make any roster additions. If you make any changes to your roster, simply re-fax it to us, at (212) 734-4213, and write "REVISED!" across the top.

BIG CITY

TEAM ENTRY FORM

IMPORTANT! HOW TO REGISTER YOUR TEAM:

- 1) Team Captain: you **MUST** send us an e-mail at info@bicityvolleyball.com, stating your intention to register your team.
- 2) Next, complete this form and fax it to us at (212) 734-4213.

TEAM NAME _____

Formerly called: _____
If team played in Big City previously under a different name

Team Captain _____

Work phone _____

Cell phone _____

Home phone _____

Co-Captain _____

Work phone _____

Cell phone _____

Home phone _____

PLAYERS

RETURNING TEAMS ONLY: Please write "new" after any new players you're adding this season. (This is to remind you that new players must fill out a waiver form (kept in all gyms, or you can download one) before they play!)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

- Teams may have anywhere from 6 to 15 people. Eight is the recommended minimum to avoid forfeits.
- Players can play on more than 1 team, but only on one team per division.
- Please make checks payable to BIG CITY VOLLEYBALL LEAGUE.

Night-of-the-week choices IMPORTANT INFORMATION! PLEASE READ CAREFULLY!!

Please indicate your choices for which nights are best for your team, in order from 1-4. Most teams end up with either their first or second choice. (Once in a great while a team may end up on their 3rd choice of night—although this is rare). We can't give every team their 1st choice of night because not every skill level plays every night. With that same limitation in mind, here's an example of how in a rare instance, a team may end up on their 3rd choice of night: If your skill level ("division") is only playing on Mon. and Wed. nights, and your choices are 1-Tues., 2-Thurs., 3-Wed., we obviously *have to* give you your 3rd choice.) **BOTTOM LINE: Do not put down any nights that you cannot field your team.** Any nights you put down must be acceptable to your teammates. Teams cannot assume they are going to get their 1st, or even 2nd choice of night (although, as mentioned, most teams *will* get either their 1st or 2nd choice). Please note: If you give us just one choice of night, it is with the understanding that there is a reasonable chance your team will not be able to play this season. (In such instances, your registration fee would be refunded.)

Rank (1-4) your night-of-the-week preferences:

___ Mon. ___ Tues. ___ Wed. ___ Thurs.

(Note: You may write "NG" (no good) next to one of the nights.)

_____ Date

_____ **Team Captain's signature**

By signing above, I acknowledge I have carefully read, and accept Big City's night-of-the-week conditions, and understand that the league will proceed with making the schedule based on the information I've provided.

AUTHORIZING COMPANY AGENT READ & SIGN BELOW:

REGISTRATION AUTHORIZATION

Since a company check for the team registration fee is often not processed and ready by the registration deadline, please have the appropriate party sign this binding Registration Authorization.

I, the undersigned, do hereby authorize the expenditure for our company team to play in the Big City Volleyball League. If for some reason, it turns out that we are not able to enter a team this season, we will still be liable for the entire \$1250 registration fee.

_____ Please PRINT: Authorizing person & Title

_____ Signature

_____ Company

_____ Date