

ACTIVITY NAME: Sand Volleyball – Summer 2023

ACTIVITY ID#: _____

**COMMUNITY EDUCATION AND RECREATION
ADULT TEAM SPORTS REGISTRATION FORM**

CAPTAIN FIRST NAME: _____ LAST NAME: _____

ADDRESS: _____ CITY: _____ STATE: ____ ZIP: _____

PHONE: (CELL) _____ (WORK /HOME) _____

E-MAIL ADDRESS: _____

GENDER: M F DATE OF BIRTH: ____/____/____ (MM/DD/YYYY)

LEAGUE REGISTERING FOR: _____ TEAM NAME: _____

DESIGNATED PAYER (OTHER THAN CAPTAIN): _____

PRIOR LEAGUE: _____ PREVIOUS TEAM NAME: _____

DAY OF PLAY PREFERENCE: _____ Captain's Packet = ON WEB

SPECIAL REQUESTS (potential bye dates IF available).

YOU MAY REQUEST, BUT THERE ARE NO GUARANTEES!

**PERSONAL CHECKS ARE ACCEPTED ONLY FROM THE TEAM SPONSOR OR TEAM MANAGER.
PLEASE MAKE CHECKS PAYABLE TO ANN ARBOR PUBLIC SCHOOLS**

PLEASE COMPLETE IF PAYING BY CREDIT CARD (No Discover Card)

Name _____

Print the name exactly as it appears on the credit card

VISA MASTERCARD AMERICAN EXPRESS Amount charged \$ _____

Card # _____ Exp. Date: _____ CVV Code: _____

Signature (required) _____

I agree to pay above total amount according to the card issuers agreement and the Community Education and Recreation Refund/Credit policy listed in the organizational notes.

*** FOR USE BY RETURNING TEAMS ONLY ON PRE-REGISTRATION DAY***

**** In order to qualify for pre-registration, teams must fulfill one of the three criteria below:***

- 1) Returning captain from previous season's team – CAPTAIN'S NAME: _____
- 2) Returning sponsor from previous season's team – SPONSOR'S NAME: _____
- 3) Two players returning from previous season's team (roster may be required)

REGISTRATION DATES: Returning Teams only APRIL 17, 2023
All Teams: APRIL 18, 2023
DEADLINE: **APRIL 28** (call for openings after)