Team Registration Form

INSTRUCTIONS: All fields are required. To register for the 2024 Spring Volleyball League. Return the filled-out form with your team fee, player fees, and a signed official roster to the Meridian Parks and Recreation Office by: **Tuesday, March 5th, 2024, by 5 p.m. , by 5 p.m.** *Spots are on a first-come, first-serve basis and not guaranteed until*

payment is received in full. If paying with two or more forms of payment types and/or multiple payees. Please call beforehand for instructions as payment processes have changed. Paperwork and payment must be received by the deadline and still have available spots open.

League Fees: (Includes 9 league games and NO End of Season Tournament, and USSSA Registration.) Team Fees - \$275 per team Meridian Resident Player Fee - \$10 Non-Resident Player Fee - \$20 Player fees are non-transferable from player to player

Each match will be 3 games with a total time limit of 55 minutes.

Amount Paid:

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Date paid:

Team Name:		
Team Manager:	Phone:	
Home Mailing Address:		
City:	State:	Zip:
Email Address:		
Teams you share players with (I	f Necessary) list team name and coaches name	e:
City League and Division played	Last Season:	
	_Division:Team Win/Loss Record: Division:Team Win/Loss Record:	
Division desired this year: (1 is t Coed: C1C20	he highest level, 8 is the lowest.) Pick only on C3C4C5C6C7C8 '2W3W4W5W6	
-	ns will play Monday, Wednesday, and Friday eams will play Tuesday, Thursday, and Friday	payment must be received by the deadline and still have
Please give your top two choi	ces: (Times are not guaranteed.)	available spots open.
6:00	p.m 7:00 p.m 8:00 p.m 9:00 p.m	
follow the below steps to complete a payment types and/or multiple payer Phone-In - Call 208-888-3579 and p form and roster form to recreation@ Walk-In - Come into our office at 33 in person with cash, check (payable Mail-In - Mail your completed registr	E. Broadway Ave., Suite 206, with a completed reg	with two or more forms of ent processes have changed.) in both the completed registration istration form and roster and pay
Payment Method (Office Use Only)		
Check #: Cash:	Credit Card:In Perso	on or Online:

City Receipt Number:

Received By: