New York Urban Professionals Volleyball League 155 West 72nd Street* Suite 701* New York, NY 10023

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TEAM ENTRY FORM - SPRING 2019

TEAM NAME	CoedMen's
	Women's
TEAM CAPTAIN	
CAPTAIN'S ADDRESS	
CAFTAIN S ADDRESS	ZIP
Telephone: Office	Home/Cell
E-mail	
ALTERNATE CAPTAIN	
Telephone: Office	Home/Cell
E-mail	
<u>PLAYERS</u>	
1	9
2	
3	
4	
5	13
6	14
7	15
8	
A team may have as many	as 15 players on its roster and to insure that there are
· · · · · · · · · · · · · · · · · · ·	yers is probably the ideal amount to provide everyone
with enough playing time.	1 6 A 11454 2010 To 11 1 1 610 D. 1
	veek of April 15th, 2019. It will consist of 10 Regular visional Playoffs and Interdivisional Playoffs for the
,	n entry fee is \$1,350 and includes 10 T-Shirts and all
Court and Referee Fees. No refund	
Dated:	
	Signature of Individual Entering Team

TE	EAM NAME:	
1.	Last time our team played was: Winter '19 (now ending) Fall'18, Summer'18, Spring '18, New team (if you answered "New Team" go right to question 7)	
2.	Our previous name was	
3.	Our previous record was	
4.	Compared to our last team we are : The same a little better a little worse much better much worse	
5.	Compared to our last team, I think our team belongs in: The same division Up 1 division Down 1 division Up 2 divisions Down 2 divisions Updivisions Down divisions	
6.	Why?	
7.	Any <u>serious</u> scheduling problems? If so, please specify below in a complete sentence:	
8.	Are there any specific DATES that you can't make during the season due to holidays (religious or hallmark), mom's birthday, travel etc? If so, please list DATES:	