New York Urban Professionals Volleyball League

155 West 72nd St., Suite 406, New York, N.Y. 10023 212- 877-3614 * Fax 315 610 6606 *Nyurbansports@gmail.com

TEAM ENTRY FORM - SUMMER 2024

TEAM NAME		
TEAM CAPTAIN		
CAPTAIN'S ADDRESS		
		_ZIP
Telephone: Cell:	Work	
Home:		
ALTERNATE CAPTAIN		
Telephone: Cell:	Work	
Home:		
PLAYERS		
1		
2		
3		
4		COED
5		COED MEN'S
7		WOMEN'S
8		
9		
10		
11		
12		
13		
14		
15		

A team may have as many as 15 players on its roster and to insure that there are no defaults, no less than 8. The season begins the week of July 15th, 2024. The team entry fee is \$1,099.00 for returning Spring Teams (\$1149 for all others) and includes 8 matches, 1 Pre-Season Scrimmage for New Teams, Divisional & Inter-Divisional Playoffs plus all Court and Referee Fees. No refunds after the start of the season.

Dated:_____

Signature of Individual Entering Team

TEAM NAME: _____

- Last time our team played was: (check one) Spring '24__ (now ending), Winter '24__, Fall '23_, Summer '23__ / Neither, New team__
 Our team name was _______
 Our record was _______
 Compared to our last team we are: The same______ a little better_____ a little worse______
 Compared to our last team, I think our team belongs in: The same division_______
 Compared to our last team, I think our team belongs in: The same division________
 Mup one divisions________ down one divisions_______
 Why?____________
- Any <u>serious</u> scheduling problems? If so, please specify clearly below in a complete sentence: We______
- 8. Are there any specific DATES that you can't make during the season due to parties, travel or Religious Holidays? If so, please list SPECIFIC DATES: