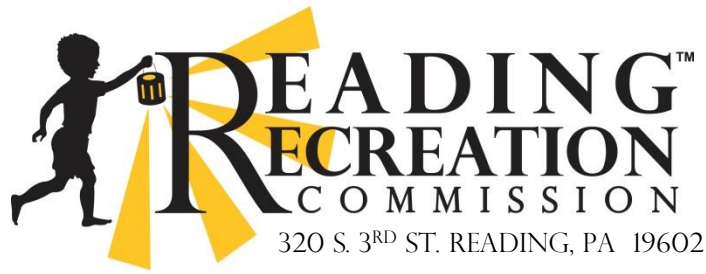


Thank you for your interest in the 2023 Adult Summer Volleyball League. The league is scheduled from May 11-August 10, 2023 including playoffs. The below information is provided for your use in registering your team to participate in the league.

1. All communication will be done via email. Please ensure your proper contact information is provided.
2. All matches will be played at the 3<sup>rd</sup> & Spruce Recreation Center (320 South 3<sup>rd</sup> Street Reading PA 19602)
3. Leagues play as follows: Thursday Coed BB/B. Should there not be enough to form 2 leagues. The league will be combined.
4. Game time start will be between 6:30pm and 8:30pm.
5. This year, the entry fee is \$225.00 payable to the Reading Recreation Commission
6. Teams will be responsible for paying the referee fee prior to game time (\$20 match).
7. Players under 18 years of age must have parental/guardian consent.
8. Preliminary roster is due when registering. All rostered players will be required to sign player waiver prior to first match,
9. The Recreation Commission must receive your Registration Form and Team Fee by Friday, April 28, 2023. NO EXCEPTIONS.
10. Please contact Matt Lubas, Recreation Supervisor at 610-655-6067 (office) with any questions, or email at [matthew.lubas@readingpa.gov](mailto:matthew.lubas@readingpa.gov)



## 2022 SUMMER VOLLEYBALL LEAGUE REGISTRATION FORM

|  |                      |   |
|--|----------------------|---|
| <u>Team Name:</u>  |                      | <u>Division:</u> (Circle) Coed BB / Coed B<br>Divisions will be combined if not enough for each league. |
| <u>Captain's Name:</u>   |                      |   |
| <u>Address:</u>  |                      |   |
| <u>City:</u>   | <u>State:</u>        | <u>Zip:</u>   |
| <u>Phone:</u>  |                      |   |
| <u>Email:</u>  |                      |   |
| <b>2023 Team Registration Fee</b>                                    |                      |   |
| <u>Team Fee:</u> \$225.00 (payable to Reading Recreation Commission) |                      |   |
| <u>Signature:</u>  | <u>Date:</u> /     / |   |

### For Office Use Only

|                     |                         |
|---------------------|-------------------------|
| <u>Total Paid:</u>  | <u>Form of payment:</u> |
| <u>Received By:</u> | <u>Date:</u> /     /    |



Preliminary Roster-Due at time of team registration.

First Name

Last Name

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

11. \_\_\_\_\_

12. \_\_\_\_\_