



SHEBOYGAN YMCA
 812 Broughton Drive, Sheboygan, WI 53081
 P 920-451-8000 • F 920-451-8019
www.sheboygancountyyymca.org



FOR YOUTH DEVELOPMENT®
 FOR HEALTHY LIVING
 FOR SOCIAL RESPONSIBILITY

2017 - 2018 WINTER ADULT VOLLEYBALL LEAGUES

MENS 4 ON 4 VOLLEYBALL LEAGUE

NOVEMBER 29, 2017 TO MID-FEBRUARY, 2018

Teams officiate their own matches and must display good sportsmanship.

Wednesday..... Matches between 6:00pm - 10:00pm

WOMENS "A/B+" 6 ON 6 VOLLEYBALL LEAGUE

NOVEMBER 27, 2017 TO MID-FEBRUARY, 2018

The "A" division is an advanced skill level of competition. The "B+" division is fairly well skilled, knowledge of rules and competitive. All matches are officiated.

Monday..... Matches between 6:00pm - 10:00pm

COED "A" 6 ON 6 VOLLEYBALL LEAGUE

NOVEMBER 30, 2017 TO MID-FEBRUARY, 2018

In this top skill level league, teams officiate their own matches and a high level of sportsmanship is required. New teams must be approved by the league coordinator.

Thursday..... Matches between 6:00pm - 10:00pm

COED "B/B+" 6 ON 6 VOLLEYBALL LEAGUE

NOVEMBER 30, 2017 TO MID-FEBRUARY, 2018

The "B+" division is fairly well skilled, knowledge of rules and competitive. The "B" division requires some playing experience. Knowledge of the game, fun and exercise are emphasized. All matches are officiated.

Thursday..... Matches between 6:00pm - 10:00pm

- Leagues run approximately 10 weeks. Schedules will be emailed to captains by the first week of play.
- Teams will NOT be accepted after the registration deadline or without full payment at registration.
- For mens/womens leagues, please contact Ashley at arietbrock@sheboygancountyyymca.org or 920-451-8000 x182.
- For coed leagues, please contact Matt at mmueller@sheboygancountyyymca.org or 920-451-8000 x117.
- **The registration deadline is November 16, 2017.**



SHEBOYGAN YMCA 2017 - 2018 WINTER ADULT VOLLEYBALL LEAGUES

Please return to the Sheboygan YMCA, 812 Broughton Drive, Sheboygan, WI 53081

Team Name _____ Captain _____
EMAIL required _____ Phone 1 _____ Phone 2 _____
 Address _____ City _____ State _____ Zip _____

Please check the box if you are a YMCA member.

Player Name	Phone #	Player Name	Phone #
1. _____	_____ <input type="checkbox"/>	6. _____	_____ <input type="checkbox"/>
2. _____	_____ <input type="checkbox"/>	7. _____	_____ <input type="checkbox"/>
3. _____	_____ <input type="checkbox"/>	8. _____	_____ <input type="checkbox"/>
4. _____	_____ <input type="checkbox"/>	9. _____	_____ <input type="checkbox"/>
5. _____	_____ <input type="checkbox"/>	10. _____	_____ <input type="checkbox"/>

HOLD HARMLESS AGREEMENT

I hereby agree to waive any claim or liability on the YMCA arising out of use of the facility, and further agree that I will indemnify and save harmless the YMCA from any and all claims of every kind and description which may be brought against the YMCA on account of death, injury or damage to persons or property received by any persons by reason of acts or omissions of the users in their use. I understand the above responsibilities and I give permission for my team to participate and be photographed in YMCA activities.

Captain's Signature _____ **Date** _____

MENS VOLLEYBALL LEAGUE - UNOFFICIATED

\$99.00 Team Fee
 \$20.00 discount if at least 3 YMCA members on team

WOMENS "A/B+" VOLLEYBALL LEAGUE

\$191.00 Team Fee
 \$30.00 discount if at least 3 YMCA members on team

Division

A Division B+ Division

COED "A" VOLLEYBALL LEAGUE - UNOFFICIATED

\$99.00 Team Fee
 \$20.00 discount if at least 3 YMCA members on team

COED "B/B+" VOLLEYBALL LEAGUE

\$191.00 Team Fee
 \$30.00 discount if at least 3 YMCA members on team

Division

B Division B+ Division

PAYMENT

Cash Check Credit Card # _____ Exp Date _____ 3 Digit Code _____

Receipt # _____ Amount Paid _____ Rec'd By _____ Date _____ 17F2-1ALEAGVBALL...