



# GET IN THE GAME

## Adult Volleyball League

**Women's Power: Monday**

**Women's Rec: Tuesday**

**COED: Wednesday**

**Cost - \$200/team**

**Discounts for YMCA Members**

**9 Week Session**

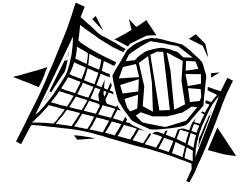
**Games start February 22**

**Deadline to register February 17**

Questions? Please contact Cole at 222.9622 ext. 212.



# Quincy Family YMCA Volleyball Leagues



February – April

The Quincy Family YMCA Adult Volleyball Leagues are a great way for you to spend time with your friends and have fun. You can even receive up to a \$50 discount when you have YMCA members on your team.

## Registration

**Deadline: February 17<sup>th</sup>**

**Schedules available: February 19th**

**Games Start: Week of February 22<sup>nd</sup>**

## Team Fee - \$200

Team fee credit: Receive \$10 off team fee for every Y member on your team up to 5 members

## Leagues and Nights

|               |           |
|---------------|-----------|
| Women's Power | Monday    |
| Women's Rec   | Tuesday   |
| COED          | Wednesday |

**IMPORTANT:** Volleyball schedules will be available on **February 19th**. **Total team fee, roster, and member verification must accompany registration to insure a place in the league.** Members can be verified at the Welcome Desk to ensure the \$10 discount for each Y member on your team up to 5 members. Please contact Cole Nelson (colen@quincymca.net ) if you have any questions about our adult volleyball leagues and nights. Thank You.

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## 2021 VOLLEYBALL LEAGUE REGISTRATION FORM

Captain's Name \_\_\_\_\_ Team Name \_\_\_\_\_

Captain's Address \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

e-mail address: \_\_\_\_\_

**Choose one (1)**      \_\_\_\_\_ Women's Power (Monday)

\_\_\_\_\_ Women's Rec. (Tuesday)

\_\_\_\_\_ COED (Wednesday)

The YMCA tries to schedule games for your convenience. However, if unable to do so, you must play at your scheduled time. I have read the above and understand the rules.

CAPTAIN'S SIGNATURE \_\_\_\_\_



If you are not interested, please pass on to a friend.

Quincy Family YMCA  
3101 Maine Street  
Quincy IL 62301

**QUINCY FAMILY YMCA  
Adult Volleyball**

TEAM NAME: \_\_\_\_\_

CAPTAIN'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE # (home) \_\_\_\_\_ (work) \_\_\_\_\_

| <b>TEAM PLAYER'S NAME</b> | <b>ADDRESS</b> | <b>PHONE</b> | <b>MEMBER<br/>(Yes or No)</b> |
|---------------------------|----------------|--------------|-------------------------------|
|---------------------------|----------------|--------------|-------------------------------|

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_

Our participants, as a team, agree to abide by all the rules and regulations set forth by the Quincy Family YMCA. We understand that failure to abide by these rules and YMCA fair play will result in the dismissal of player(s) and/or from YMCA leagues and any fees paid will be forfeited.

CAPTAIN'S  
SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_