



Niagara Peninsula Sports

Co-Ed Recreational

TO BE SUBMITTED BY CAPTAIN

*Name:			
*Recreational League:	(Soccer)	(Volleyball)	
*Starting Date:	(Spring)	(Summer)	
*Street Address:			
*City:		_*Postal Code:	
*Phone:			
*Email:			
*Fee Amount:			
*Team Name:			

Make cheques payable to Niagara Peninsula Sports

-teams MUST submit one cheque covering full registration of team
-Individuals can register for \$45 (includes HST) for soccer
-Individuals can register for \$50 (includes HST) for volleyball

The individuals whom will be on my team are:

Name	Phone Number	Email	M/F
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Each individual must sign the Assumption of Risk and Release of Liability Waiver Form before first game day.

Send Registration To:

Niagara Peninsula Sports 6809 Devon Drive Niagara Falls, Ontario L2H 2S7

-if you have any questions please phone (289-686-6668) or (289-407-5533) for more details.