



TEAM REGISTRATION FORM

Team Name: _____

Captain: _____ Home Phone: _____

Home Address: _____ Cell Phone: _____

City/Zip: _____ E-mail Address: _____



Card Number _____ CID# _____ Expiration _____

Card Holder's Name _____ Amount Charged \$ _____

Authorized Signature _____

Cash _____ Check # _____ Check Amount _____

**** A VALID CREDIT CARD NUMBER MUST APPEAR ON THE REGISTRATION FORM FOR ANY TEAM NOT PAYING IN FULL AT THE TIME THE FORM IS SUBMITTED. WITHOUT VALID CREDIT CARD INFORMATION, A TEAM CANNOT BE ENTERED INTO THE LEAGUE****

If the FULL payment is not received by the night of the first games (Aug. 15-19th) the credit card will be charged the remaining fee. NO EXCEPTIONS

I understand that I am held responsible for any outstanding balance after the due date**

Team Captain Signature: _____ Date: _____

For consideration as a resident team, 60% of the roster must reside in Bartlett. Please indicate your team status, residency status, and league you wish to register for with an "X."

Returning Team: ___ New Team: ___ Resident: ___ Regular: ___

Teams that finished in the Spring 2021 season in 1st place may be moved up one division.

<u>Men's 12" and 16"</u>	Price	<u>Co-Ed 14"</u>	Price
___ Sunday "Open" League	\$640R/\$665Reg	___ Monday "Open" League	\$640R/\$665Reg
___ Tuesday "Open" League	\$640R/\$665Reg	___ Tuesday "Open" League	\$640R/\$665Reg
___ Thursday "Comp" League	\$640R/\$665Reg		
___ Thursday "Rec" League	\$640R/\$665Reg		

Drop-off or mail to: Bartlett Park District, Attn: Eric Eichholz, 700 S. Bartlett Road Bartlett, IL 60103 or

Fax to our registration computer: 630-540-4869

Email form to: eeichholz@bartlettparks.org.

If you have any questions, please call Eric Eichholz, Recreation Manager, at 630-540-4831