

Byron Township Adult Volleyball League Roster

**Rosters are due by Friday, September 19, 2008 by 5:00pm in the office.
Rosters will not be accepted at the gym.

Team Name:
Manager's Name:
Phone:
Work Phone:
Email:

Print First and Last Name	Birthdate	Address, City, State Zip	Phone	Player Signature
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Waiver: I realize that by participating in this league there is a certain amount of risk involved and that injuries may occur. I realize that by signing this form, I will not hold Byron Township or Byron Township employees responsible for any injuries that may occur in the adult volleyball program.

Byron Township Parks and Recreation: 8085 Byron Center Avenue, Byron Center, MI 49315
Phone: 878-1998
Fax: 878-3980

Fall 2008