



HOLIDAYS

SPORTSBAR & VOLLEYBALL

Team Name _____

Paid By _____

Captain _____

Captain's cell _____

*print clearly to receive Game times via text *

Notes _____

(*CIRCLE/SELECT)

Mon Tue Wed Thu Fri Sat

PARTY · DARTS · 4MAN

COED INT A · COED REC B · COED REC C

Winter Summer 1 2

Check# _____ \$ _____

Cash \$ _____

Today's total \$ _____ Date: / /

Received By: _____

*fees due in full 2nd week

*** DEPOSITS ARE NON-REFUNDABLE! ***

HOLIDAYS SPORTS COMPLEX

Phone: 716-824-8812

Email: jr@holidaysvolleyball.net

935 Harlem Rd West Seneca, NY 14224

