

Adult Team Sports

Women's Basketball

Registration: August 1st - September 8th. The team fee is due at time of registration. Captains meeting will be held on September 8th at 5:30 PM. League fees include 12 games, plus a double elimination tournament and prizes for top three finishers in league and tournament.

Total Team Fee: \$310

LIMIT OF 8 TEAMS.

NO Late Registrations Accepted.

Season begins September 14th and ends October 21st.

Game Schedule : Mon., Tues., and Wed. at 6:30 PM, 7:30 PM, 8:30 PM.

Co-Ed Recreational Soccer 6 V 6

Registration: August 1st - September 7th. The team fee is due at time of registration. Captains meeting will be held on September 7th at 5:30 PM. League fees include 6 games and prizes for top three finishers in league.

Total Team Fee: \$125

LIMIT OF 6 TEAMS.

NO Late Registrations Accepted.

Season begins September 12th and ends October 17th.

Game Schedule : Sundays 2:00 PM, 3:00 PM, 4:00 PM

Carroll Park

Men's Basketball

Registration: August 1st - November 15th. The team fee is due at time of registration. Captains meeting will be held on November 15th 5:30 PM at the AFRC. League fees include 12 games, plus a double elimination tournament and prizes for top three finishers in league and tournament.

Total Team Fee: \$510

LIMIT OF 14 TEAMS.

NO Late Registrations Accepted.

Season begins November 29th.

Game Schedule : Mon., Tues., Wed., Thurs. at 7 :00 PM, 8:00 PM, 9:00 PM

Alamosa Family Recreation Center





Alamosa Family Recreation Center
2222 Old Sanford Road
Alamosa, Colorado 81101
www.alamosarec.org
(719) 589-2105

ADULT BASKETBALL 2010-2011

Men's \$510 Women's \$310

CAPTAIN INFORMATION			TEAM NAME:	
Last Name:		First Name:		DOB:
Current address:				
City:		State:		Zip Code:
Primary Phone:		Secondary Phone:		Male Female
(required) Email Address:				
CO-CAPTAIN INFORMATION				
Last Name:		First Name:		DOB:
Current address:				
City:		State:		Zip Code:
Primary Phone:		Secondary Phone:		Male Female
(required) Email Address:				
<p>IN CONSIDERATION OF YOUR ACCEPTING THE ENTRIES ON THIS FORM, I HEREBY, FOR MYSELF AND MY FAMILY MEMBER(S) WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I MAY HAVE AGAINST THE CITY OF ALAMOSA AND ITS REPRESENTATIVES, EMPLOYEES, SUCCESSORS FOR ANY AND ALL INJURIES SUFFERED BY MYSELF OR MY FAMILY MEMBERS AT THE ABOVE DESIGNATED ACTIVITIES SPONSORED BY THE ALAMOSA PARKS & RECREATION DEPARTMENT.</p>				
TEAM ROSTER (MINIMUM 8 PLAYERS)				
First Name:	Last Name:	Signature		Phone Number
1.				
2.				
3.				
4.				
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11.				
12.				
13.				
14.				
15.				

*This roster must contain 1.) the required minimum number of player names with original signatures 2.) Total team fee in order to be certified. Certified rosters will be registered on a first come first serve basis. Captains/Co-Captains should be listed as players on roster if participating.



Alamosa Family Recreation Center
 2222 Old Sanford Road
 Alamosa, Colorado 81101
www.alamosarec.org
 (719) 589-2105

ADULT CO-ED RECREATIONAL SOCCER 6 V 6 2010

Co-Ed Recreational \$125

CAPTAIN INFORMATION			TEAM NAME:	
Last Name:		First Name:		DOB:
Current address:				
City:		State:		Zip Code:
Primary Phone:		Secondary Phone:		Male Female
(required) Email Address:				
CO-CAPTAIN INFORMATION				
Last Name:		First Name:		DOB:
Current address:				
City:		State:		Zip Code:
Primary Phone:		Secondary Phone:		Male Female
(required) Email Address:				
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