

Northeast Women's Volleyball Club League

2018-2019

League Membership Registration Form and Invoice

Invoice #: NWVCL1819MEM

Team (School) Name: _____

Captain's name: _____

E-mail: _____

DIVISION: RED or BLUE (circle one)

The league membership fee is \$350 per team for the 2018 - 2019 Season. This fee must be received by October 13th (Sat), 2018.

Please make the check out to:

NWVCL

And send it to:

NWVCL

P.O. Box 370074

West Hartford, CT 06137

* If you need tax ID number, please contact the NWVCL commissioner, Jung Park

Jung Park: NWVCL@comcast.net

**This form is for our CURRENT LEAGUE MEMBER TEAMS ONLY.
Please do not use this form if your team is not a member of our league.**

Northeast Women's Volleyball Club League