



MONDAY TEAM ENTRY FORM

Church Name: _____

Address: _____

Pastor's Name: _____ Phone: _____

Email: _____

Church Representative _____

Phone: (W) _____ (C) _____ Email _____

Monday Night Division

PLEASE INCLUDE THE TOTAL NUMBER OF TEAMS IN EACH AGE GROUP PER DIVISION ON THE LINE PROVIDED.

Ladies:	High School Boys (9-12 grade)	Men <under 30:	Men> over 30:

Entry Fees PER TEAM in each division: (see surcharges below) (ALL Monday Teams):

_____ # of teams x #310.00 (add \$50 SC per team) =	\$
Total # of teams:	
Total Fees for Current Season:	\$
Total Due:	\$

Paid in full: _____

Owes: _____

GYM AVAILABILITY

Please list dates your gym is not available on Monday's. If your gym can't be used **90%**, add surcharges.

NO EXCEPTIONS!

*If you have a gym and DO NOT allow WHCB League to use your gym the surcharge is **\$200 per team. (Same as previous seasons)**

November

December

January

February