

BAXTER JACK'S MEN'S LEAGUE PAYMENT FORM

Visit our website at <http://www.baxterjacks.com/>

CAPTAIN'S NAME: _____
YOUR NAME (if not Capt): _____
TEAM NAME: _____
ADDRESS: _____
CITY: _____ **STATE:** _____ **ZIP:** _____
WORK PHONE: _____
HOME PHONE: _____
E-Mail(Mandatory): _____

Please enter my team into the following league(please circle one)

Comments:

NIGHT	Ct 1	Ct 2	Ct 3
Sunday	Men's C	Coed C	Men's B/C / Coed C
Monday	Closed	Men's B / B+	Coed C
Tuesday	Coed C+	Coed C	Coed C
Wednesday	Coed C +/ Women's	Coed C	Coed C-
Thursday	Coed C+	Men's C+	Coed C
Friday	Coed C	Coed C	Coed C+

**Summer League Fees
Due June 15th, 2018.**

AMOUNT ENCLOSED

Summer Payment With Paid Deposit \$250.00
Summer Payment \$300.00
Late Fee if Paid After June 15th \$25.00

Check _____
 Cash _____
 Credit Card _____

TOTAL

PAYMENT METHOD:

CHECK ENCLOSED
 CASH
 MASTERCARD
 VISA

Amount

Office Use Only	
Date: _____	Initials: _____
Payment Type: _____	
Total: _____	

Credit Card Number	_____
Expiration Date	_____
Authorized/Cardholder Signature	_____
Print Name	_____

PLEASE MAKE CHECKS PAYABLE TO AND RETURN TO:
 Baxter Avenue Volleyball Club
 440 Baxter Avenue, Louisville, KY 40204
 phone - (502) 582-3530 - fax - (502) 582-1344
 or Make your payment online at baxterjacks.com

OFFICE USE ONLY

Date Received: _____ Date in Computer: _____ Date on Paper: _____