



Grand Haven Area Public Schools  
 1415 Beechtree St., Grand Haven, MI 49417  
 Phone: 616.850.5125 Fax: 616.850.5127  
 nora.ghaps.org

# Winter 2017 Dodgeball League

Lakeshore Middle School



- **Registration Deadline: Thursday, December 15, 2016** (\$10 fee for late enrollment)
- **Practice Night: Thursday, January 12**
- **Games played on Thursdays, beginning January 19**
- **Game schedules start at 6:00pm, 7:00pm, 8:00pm, 9:00pm as needed**
- **Location: Lakeshore Middle School Auxiliary Gym**
- **Teams have a minimum of 6 and a maximum of 9 players on the bench with no more than 14 on roster. Must be 16 years or older.**

**Team/Player Fee: \$275/Resident      Team/Player Fee: \$320/Non-Resident**  
 (Resident team defined by 75% or more resident players)  
 (Resident = Lives in GHAPS District Boundaries; GH City, GH Twp., City of Ferrysburg, or Robinson Twp.)  
**\$10 fee will be assessed for late enrollment.**

✂-----Registration Deadline is Thursday, December 15, 2016-----✂

**2017 Winter Dodgeball League #8607**  
**Team/Player Fee: \$275/Resident \$320/Non-Resident**  
 (Resident = Lives in GHAPS District Boundaries:  
 GH City, GH Twp., City of Ferrysburg, or Robinson Twp.)  
**Payment must accompany Registration Form**

*NORA reserves the right to cancel programs if the minimum enrollment is not achieved.*

Team Name \_\_\_\_\_  
 \_\_\_\_\_ (Please Print)  
 Manager Name \_\_\_\_\_  
 Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Primary) \_\_\_\_\_ (Secondary) \_\_\_\_\_

(Resident = Lives in GHAPS District Boundaries; GH City, GH Twp., City of Ferrysburg, or Robinson Twp.)

If league is divided into divisions, check preference. Final placement NORA discretion.  
 **Skilled "A" team**  
 **Non-skilled "B" team**

For Office Use Only:  
 Payment \$ \_\_\_\_\_  
 Cash     Check # \_\_\_\_\_  
 Visa/MC \_\_\_\_\_  
 Date \_\_\_\_\_ Intl. \_\_\_\_\_ Exp. \_\_\_\_\_

**As Team Manager, I understand I am responsible for all player and team entry fees. My failure to pay will restrict my personal participation in the Northwest Ottawa Recreation Program activities until said fees are paid. Team rosters are due by first game.**

Manager's Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Signature

Register at the Recreation Office, 1415 Beechtree St., Grand Haven, MI 49417  
**Fee due at time of registration. Mail in, online registration, walk in or call - Visa/MasterCard accepted.**  
**Make checks payable to NORA or Northwest Ottawa Recreation Authority.**