

ITALIAN COMMUNITY CENTER INDOOR BOCCE LEAGUES



MIXED FORMAT – ANY COMBINATION OF WOMEN AND MEN

Current bocce players have priority – new players will be placed on a waiting list.

First come, first served.

REGISTRATION FEES

NON-MEMBER – \$40.00 per person per league season.

ICC MEMBER - \$10 DISCOUNT – \$30.00 per person per league season.

ICC MEMBERSHIP WILL BE VERIFIED.

NON-MEMBERS: SEE THE MEMBERSHIP APPLICATION FOR COMPLETE LIST OF MEMBERSHIP BENEFITS.

EACH BOCCE TEAM MUST CONSIST OF AT LEAST FOUR PLAYERS.

Mixed Couples Leagues - Monday & Wednesday - 7:00 p.m.

Seniors Leagues - Tuesday & Thursday Afternoons - 12 Noon

8-Week Winter Season begins the week of January 7, 2019.

Team registration form due by Thursday, December 27, 2018.

Championship Playoffs – Monday, March 11 at 7:00 p.m.

Registration form must be filled out completely (including the addresses of all players and the captain's phone number). Incomplete forms will be returned to the team captain.

ICC INDOOR BOCCE LEAGUE REGISTRATION

Team name _____ Number of Players on Team: _____

Seniors (Afternoon) _____ Mixed Couples (Evening) _____ Day Preferred _____

Please make check payable to: Italian Community Center. Send this registration form to: ICC, c/o Bocce Leagues, 631 E. Chicago St., Milwaukee, WI 53202-5916. PLEASE NOTE: One check covering the registration fee for all team players must accompany each registration form or it will be returned to sender.

Team Captain Name _____

Address _____

City, State, Zip _____

Home Ph _____ Work Ph _____

Email address _____

You are an ICC member? Yes ___ No ___

Player #2 _____

Address _____

City, State, Zip _____

Is Player #2 an ICC member? Yes ___ No ___

Player #3 _____

Address _____

City, State, Zip _____

Is Player #3 an ICC member? Yes ___ No ___

Player #4 _____

Address _____

City, State, Zip _____

Is Player #4 an ICC member? Yes ___ No ___

Alternate #1 _____

Address _____

City, State, Zip _____

Is Alternate #1 an ICC member? Yes ___ No ___

Alternate #2 _____

Address _____

City, State, Zip _____

Is Alternate #2 an ICC member? Yes ___ No ___

*Do you have questions or need more information?
Call 414-223-2180 or email pastaman31@aol.com.*