



## 2025 Adult Fall Basketball League

**Registration Information:** Register at the Kiwanis Community House (4603 Lions Park Drive). Alternatively, download a copy at [www.cheyennerec.org](http://www.cheyennerec.org) and turn in the completed form, with payment, to the Kiwanis Community House. Office hours are Monday-Friday, 7:30 am-4:30 pm, or email to [rectracadmins@cheyennecity.org](mailto:rectracadmins@cheyennecity.org).

**Registration:** June 2 - July 17, 2025

**Late Registration:** July 18 - July 31, 2025/\$50 Late fee.

**Fees:** \$575/team. **Team fees must be paid at the time of registration.**

**League Begins:** August 25, 2025 and offers 10 games guaranteed plus a single elimination tournament.

**Game Location:** Beast Facility 2900 Sunflower Road.

**Team Representative Meetings:** Date and Time TBA at the Beast Facility 2900 Sunflower Road.

*If the team representative is unable to make the meeting, please send someone in your place. The meeting is intended for scheduled pick-up and any relevant information about the league.*

It is required for team representatives to read the 2025 Adult Fall Basketball League Rules, and all athletes must read and sign the City of Cheyenne Community Recreation and Events Athletic Bylaws.

We look forward to having you as part of the 2025 Adult Fall Basketball League.

David Contreras

307-637-6425

[dcontreras@cheyennecity.org](mailto:dcontreras@cheyennecity.org)

Use [www.Cheyennerec.org](http://www.Cheyennerec.org) for all league information.

*The mission of the Recreation Division is to enrich the quality of life through providing cost-effective opportunities for recreational activities, focusing on life-long wellness through exceptional programs, activities, and events for all ages in the community.*



## 2025 Adult Fall Basketball League Registration Form

Please complete the form entirely or registration cannot be accepted.

Team Name: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Team Representative #1: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work/Home: \_\_\_\_\_

Team Representative #2: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Work/Home: \_\_\_\_\_

### Division Preference:

Teams will be assigned to divisions based on the information provided on this form. If information is left blank, League Directors will assume the player/team has upward mobility concerning divisional placement. Indicate your 1<sup>st</sup> and 2<sup>nd</sup> choice for the division you can compete in, not just win. Due to registration, the number of divisions may vary from what is shown.

1 - Excellent Team Ability

2 - Very Strong Team Ability

3 - Strong Team Ability

4 - Good Team Ability

5 - Average Team Ability

6 - Below Average Team Ability

### Last Year's Team Information:

Did not play last year

Played last year (please fill out the information below)

Team Name: \_\_\_\_\_ Last Year's Division: \_\_\_\_\_ # of Returning Players: \_\_\_\_\_

Scheduling Requests: \_\_\_\_\_

Men's Division

Women's Division

40+ Division

## Team Roster

1. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

2. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

3. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

4. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

5. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

6. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

7. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

8. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

9. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

10. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

11. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

12. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

13. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

14. Name: \_\_\_\_\_ Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Shirt Size: \_\_\_\_\_