Tournament Entry Form

Sanctioned By USA Volleyball

North Texas Region

Name of Tournament _____

Sponsored By _____

Site _____ Date _____

Team _____ USAV Team # _____

Team Representative _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Work Phone _____

Gender Male Female **Division** AA A BB B

Player	**USAV #**	**Scorer / Referee**

Entry Fee: _____

Payable to: _____

Mail to: _____

No entries accepted unless entry blank is completely filled out and accompanied by entry fee

All players of a team are required to wear matching uniforms

Uniform Rule will be enforced

Each team must have a certified referee and scorer. Fee is $20 for each that is not provided

The undersigned hereby states that the above data is correct, and full information included. Penalty might be rejection of entry or disqualification.

Signature of Team Representative _____