Borderline Junior Volleyball Tournament Entry Form 2011

This entry will not be accepted unless correctly completed, signed, and accompanied by the entry fee.

Tournament location: _____ Tournament date: _____

Team: _____

Team registration number (all teams): _____

11-charcter team code (juniors' teams): _____

IMPACT- or CAP-certified coach (juniors' teams): _____

certification (circle one): IMPACT CAP 1 CAP 2 CAP 3

Team representative: _____ E-mail address: _____

Street: _____ Phone (home): (_____)_____-_____

City: _____ State: _____ Zip: _____ Phone (cell): (_____)_____-_____

Division: (circle one)

18N 18R	17N 17A 17R	16N 16A 16R	15N 15A 15R	14N 14A 14R	13N 13A 13R	12U	11U	10U

Player	USAV #	Uniform #

Entry fee: $175

Entry payable to: Borderline Junior Volleyball

Mail to: Bill Zehler
1376 Oxford Trenton Rd.
Hamilton, OH 45013

The undersigned hereby states that the above data are correct, and full information is included. Possible penalties include rejection of entry or disqualification. The above persons should have read carefully the eligibility rules applying to USA Volleyball play.

Signature of team representative: _____ Date: _____