

## **OVR Tournament Entry Form**

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

Team: Team registration number (all teams):  11-character team code (juniors' teams):    Certification (circle one):   IMPACT   CAP   CAP   CAP   CAP   CAP	Tournament		Tournament date:										
Team registration number (all teams):  11-character team code (juniors' teams):    certification (circle one):   IMPACT   CAP 1   CAP 2   CAP 3	Team:												
11-character team code (juniors' teams):    IMPACT or CAP-certified coach (juniors' teams):   Certification (circle one): IMPACT CAP 1 CAP 2 CAP 3		ation number (all											
IMPACT- or CAP-certified coach (juniors' teams):			ars' taams):										
Team representative:		-											
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Street:	Team representative:					F-mail address:							
City: State: Zip: Phone (cell):     men's   women's   boys'	·						_	ne (ho					
Division: (circle one)  AA A BB B  AA A BB B	-												
Division: (circle one)  AA A BB B  AA A BB B				' <u>-</u>				(	_				
Division: (circle one)  AA A BB B  AA A BB B		men's	women's			ρ	girls'					bovs'	
Council one   AA A BB B   AA A BB B   18R 17A 16A 15A 14A 13A 12A 11R 10   14 13 12	Division:			18N		15N	14N			11N		·	
player registration # uniform # Entry fee:		AA A BB B	AA A BB B	18R 1/A							10		
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.				2711	2011	2311		1311					
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Mail to:    Mail to:													
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Volleyball play.	_										-		
Signature of team representative:	-	•	incation. The above	e persons sho	ouid na	ave rea	id care	tully th	ie eligi	DIIITY	ruies	applying to USA	
	Signature of	taam rannasanta	tive:							Da	ato.		