2011 - 2012 RMR-USAV ADULT TOURNAMENT ENTRY FORM

(Photocopy this Entry Form for all RMR Sanctioned Tournaments)

NAME OF TOURNAMENT: _____
TEAM NAME: _____
TEAM REP: _____
ADDRESS: _____
CITY, ST ZIP: _____
HOME PHONE: _____
CELL PHONE: _____
WORK PHONE: _____
E-MAIL ADDRESS: _____

CIRCLE DIVISION:
Womens Mens

EVENT INFORMATION

_____ _____
(DAY) (DATE)

Entry Fee Amount: $90.00
Check #: _____

Mail Entry & Tournament Fee To:
RMR-USAV
4155 E Jewell Ave, Suite 909
Denver, CO 80222

	PLAYER NAMES		Gender	RMR # Verified	Score-Keeper	Referee/	Uniform #
	LAST	FIRST					
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
Cch:							
Ast:							
Player's added on for this tournament only. (Player Pool, One Event or Player from team not playing in this tournament)							
1.							
2.							
3.							

* This entry must be completely filled out and will not be accepted without proper entry fee. Form must be signed and dated below.
* **Entry must be received by deadline listed on the tournament schedules**. (Please observe the deadline or your team may not be accepted into the tournament)!
* Uniform Code for Tournaments will follow the Current United States Volleyball Official Rules. Exception: shorts are not required to match.
* Team Reps will be contacted with site confirmation and tournament start time by the tournament director.
* All teams must use a certified Referee and scoreekeeper for all sanctioned tournaments.
* Captain meetings for adult tournaments begin at 8:15 a.m.
* Adult tournament play starts at 8:30am unless stated on the tournament schedule.

* Captain's Initials Verifying Roster The Day Of The Tournament: _____

* Please update roster the day of the tournament. Cross out people who are not playing and add new players with RMR numbers before turning this roster into the tournament director.

* In consideration of your accepting this entry, we, the undersigned, do hereby for ourselves, our heirs and assignees, waive and release any and all claims for damages we may have against schools or organizations furnishing gym facilities, RMR-USAV, or authorized representatives conducting this event, as a result of any or all injuries incurred by this event.

_____ _____
Signature of Person Mailing Roster (Coach, Captain, Manager, etc)

RMR
Rocky Mountain Region
USA Volleyball

Date Signed