

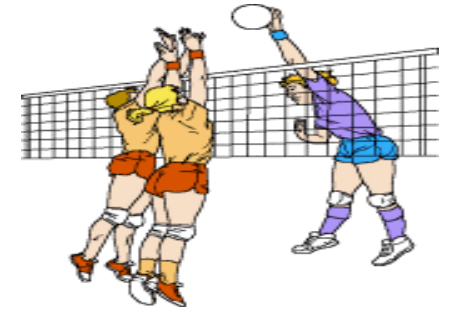


# 2<sup>nd</sup> PRCUA National Volleyball Tournament

WARREN, MI

Friday, November 2 - Saturday, November 3, 2018

Hosted by St. John Paul II Society #1593



## ENTRY FORM

Team Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Mark the circle indicating in which Division your team will play:  Men's Open (6 vs 6)  Women's Open (6 vs 6)  Co-Ed (6 vs 6)

**Each player may only sign one roster.** The undersigned hereby confirms that they are members of PRCUA in good standing. This tournament is for PRCUA members ONLY. Non-members are invited to join the PRCUA. Players agree to abide by the PRCUA rules and regulations of good sportsmanship and fair play on and off the court.

#	PRINT PLAYER'S NAME	ADDRESS - NUMBER, STREET, CITY, ZIP	PHONE #	E-MAIL ADDRESS	SOCIETY	ROSTER
1.						
2.						
3.						
4.						
5.						
6.						
7.						
8.						

Entry fee is \$50.00 per team. Entry fees must be paid prior to the tournament. Fees are non-refundable. Make your check payable to PRCUA Volleyball or use the Online Payment option at [www.prcua.org/payonline](http://www.prcua.org/payonline), indicating you are paying for: "Volleyball Tournament, (TEAM NAME)". Send application and fee to: PRCUA Volleyball Tournament, 984 N. Milwaukee Ave., Chicago, IL 60642-4101 or [Fraternal-Department@prcua.org](mailto:Fraternal-Department@prcua.org).

As manager or coach of the above team, I am responsible for the conduct of all of my team players and for the correctness of all of the above information. I understand that if any player's information has been falsified for any reason, all games in which that player(s) participated will be forfeited.

Captain/Coach: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_

**Entries must be postmarked no later than October 19, 2018.**