Badger Region - USA Volleyball / Tournament Entry Form

Wisconsin Select Madison Open 2009

Check	Date	Division	Sanction#	Entries Close	Site
	January 25	18's	09-JT-135	Jan 17	Monona Grove High School Monona, WI

Team Name		Team Play Level	To assist with seeding - circle one Low Medium High
Representative		Team ID: FJ ___ _____ __ ____	
Address		Phone: (h) (w)	
City/State/Zip		Coach	
Email: **Required**			

ATTACH SIGN-UP-TO-PLAY ROSTER			**ENTRY FEE: $150**
Name	USAV Number	Uniform #	**Payable to:**
			Wisconsin Select
			Mail entries to:
			Wisconsin Select
			3534 Stonebridge Dr
			Madison, WI 53719-4040
		COACH	
		COACH	

Post your match results to Sign-Up-To-Play to assist with tournament seeding

Contact Person: John Kingsbury (608) 848-6602 wisconsinselect@tds.net

The entry blank must be completed in full, with SUTP roster attached, signed by the team representative and accompanied by the entry fee in order to be valid for acceptance into the tournament. The undersigned hereby certifies that the information provided is accurate.

Teams will not be allowed to compete until they provide USAV Member & Team Numbers
Use Sign-Up-To-Play Roster Form
Play schedules will be distributed via email and posted to our website.

www.wisconsinselect.com

Signature of Team Representative		Date	